

Fig. 1a

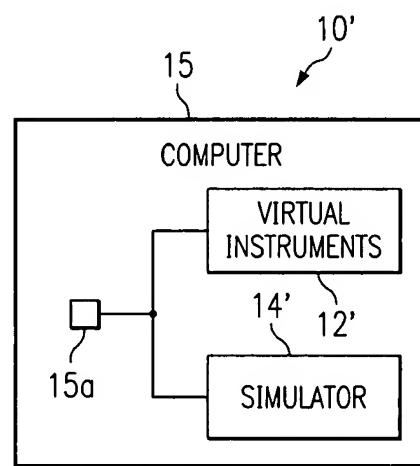


Fig. 1b

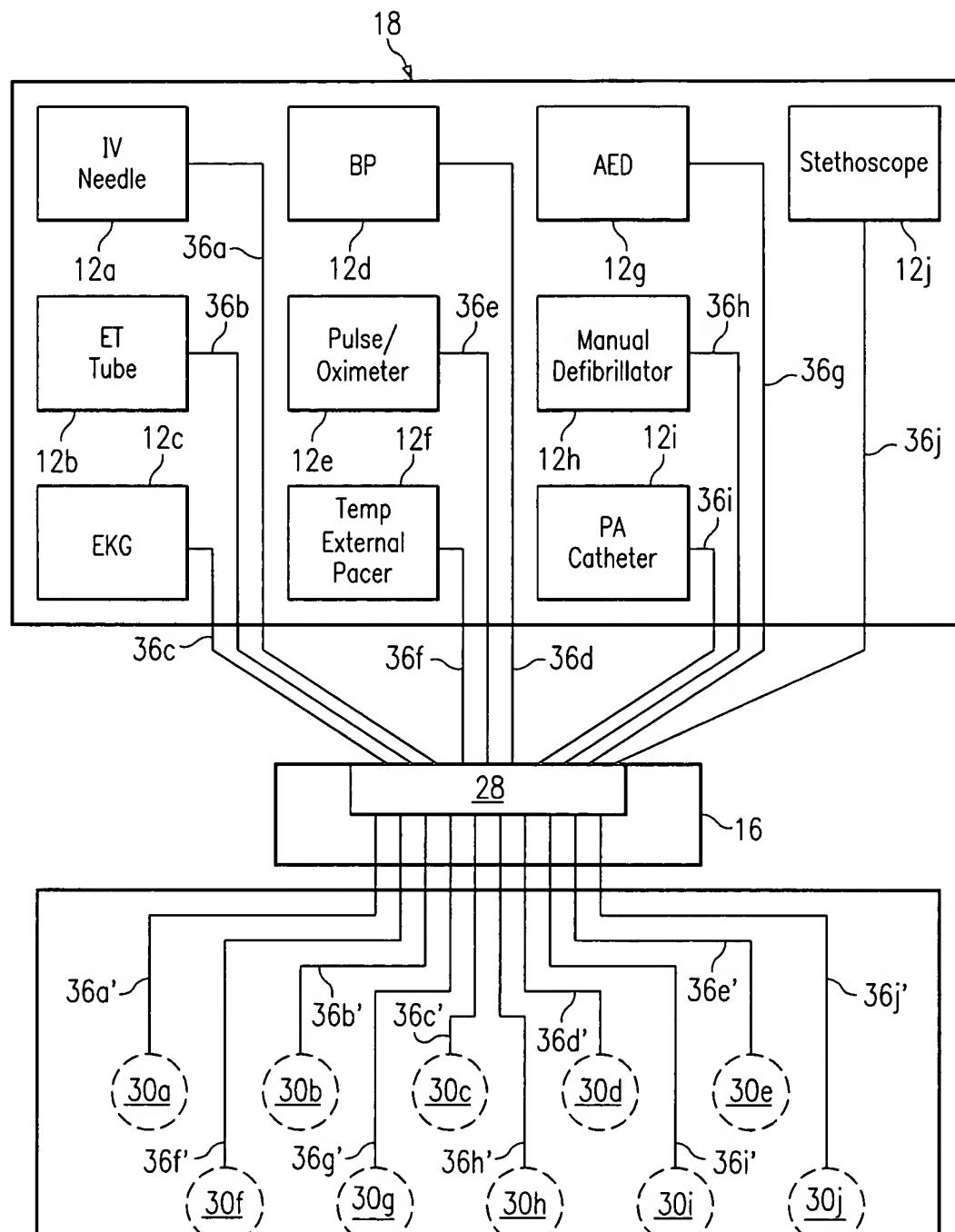
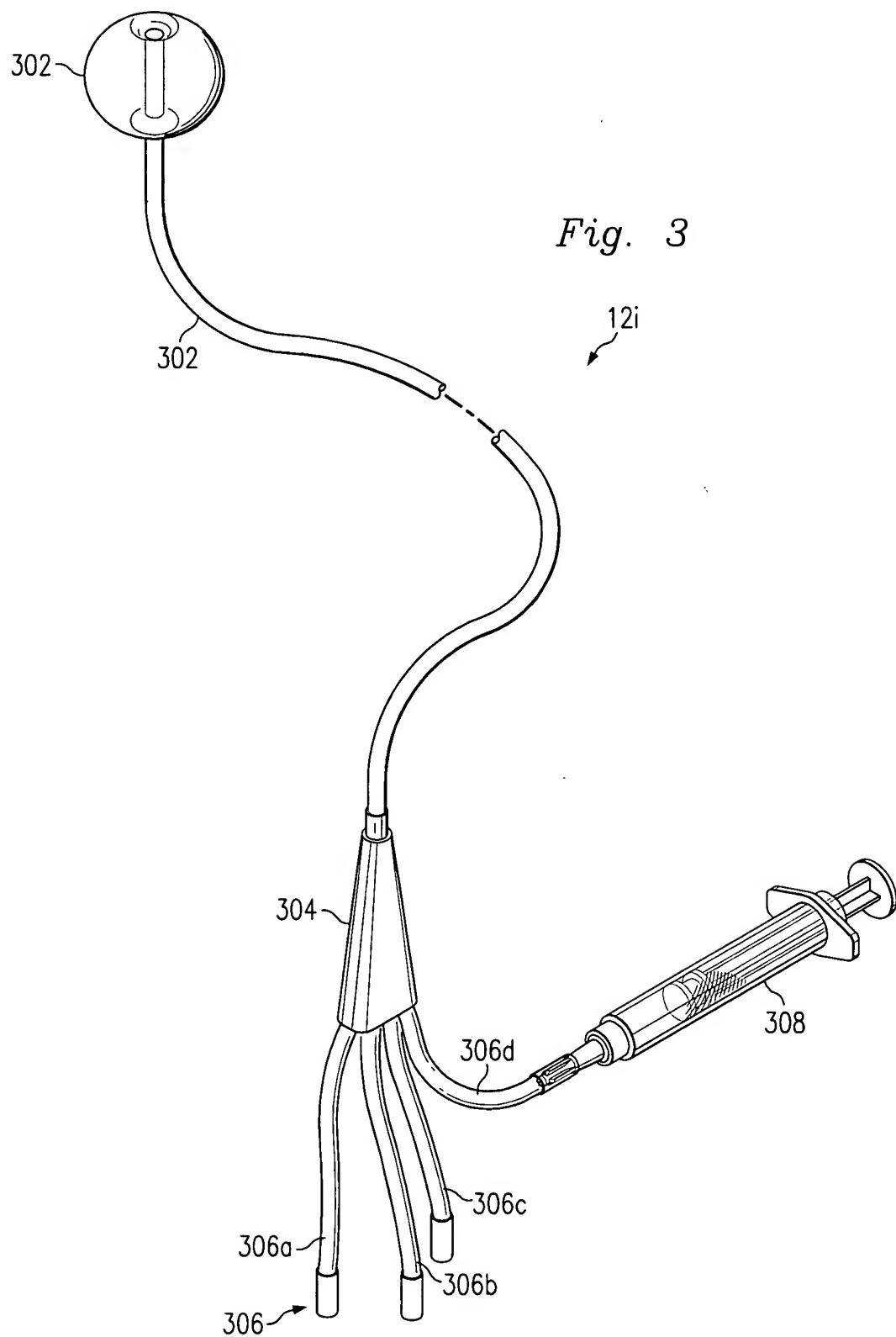


Fig. 2



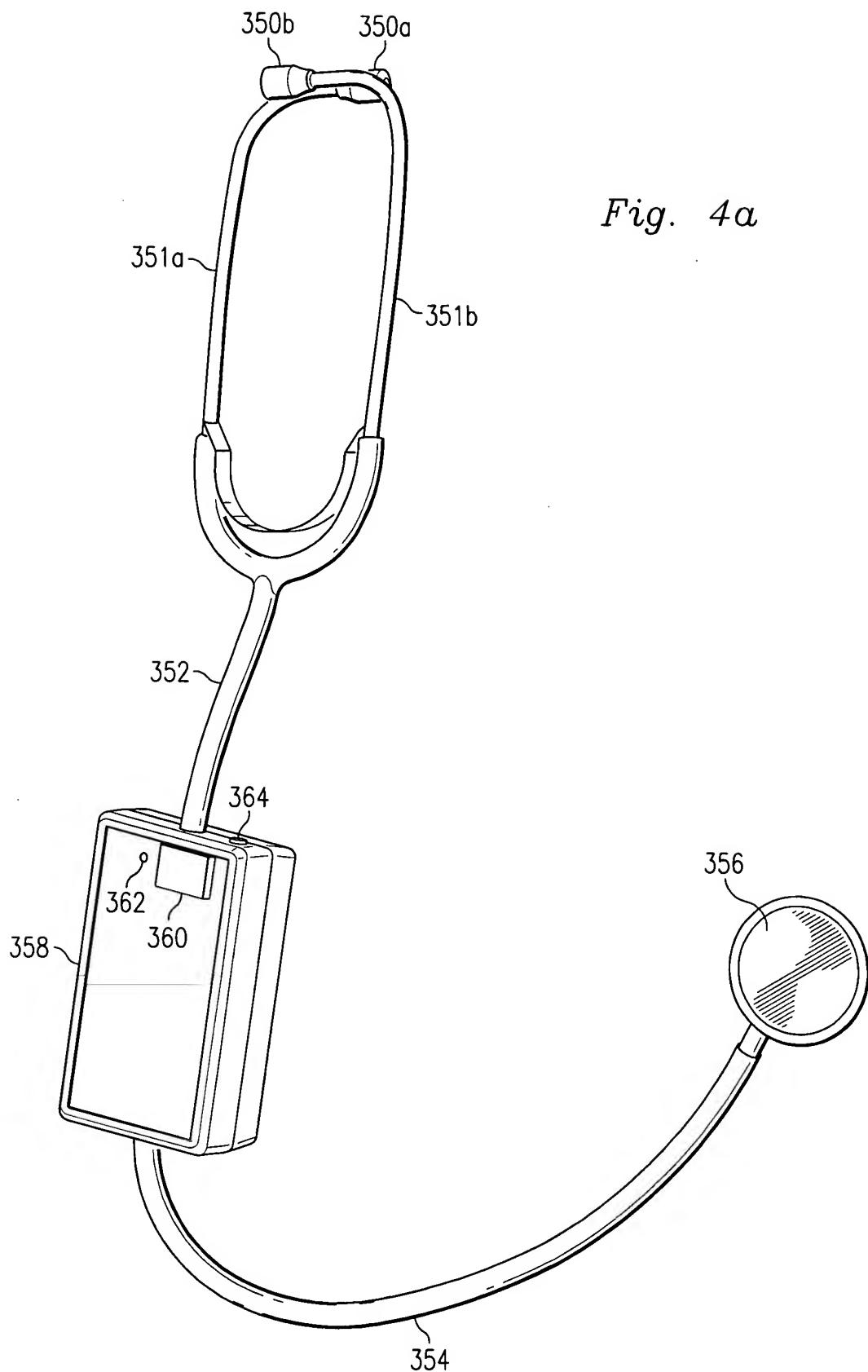


Fig. 4a

5/45

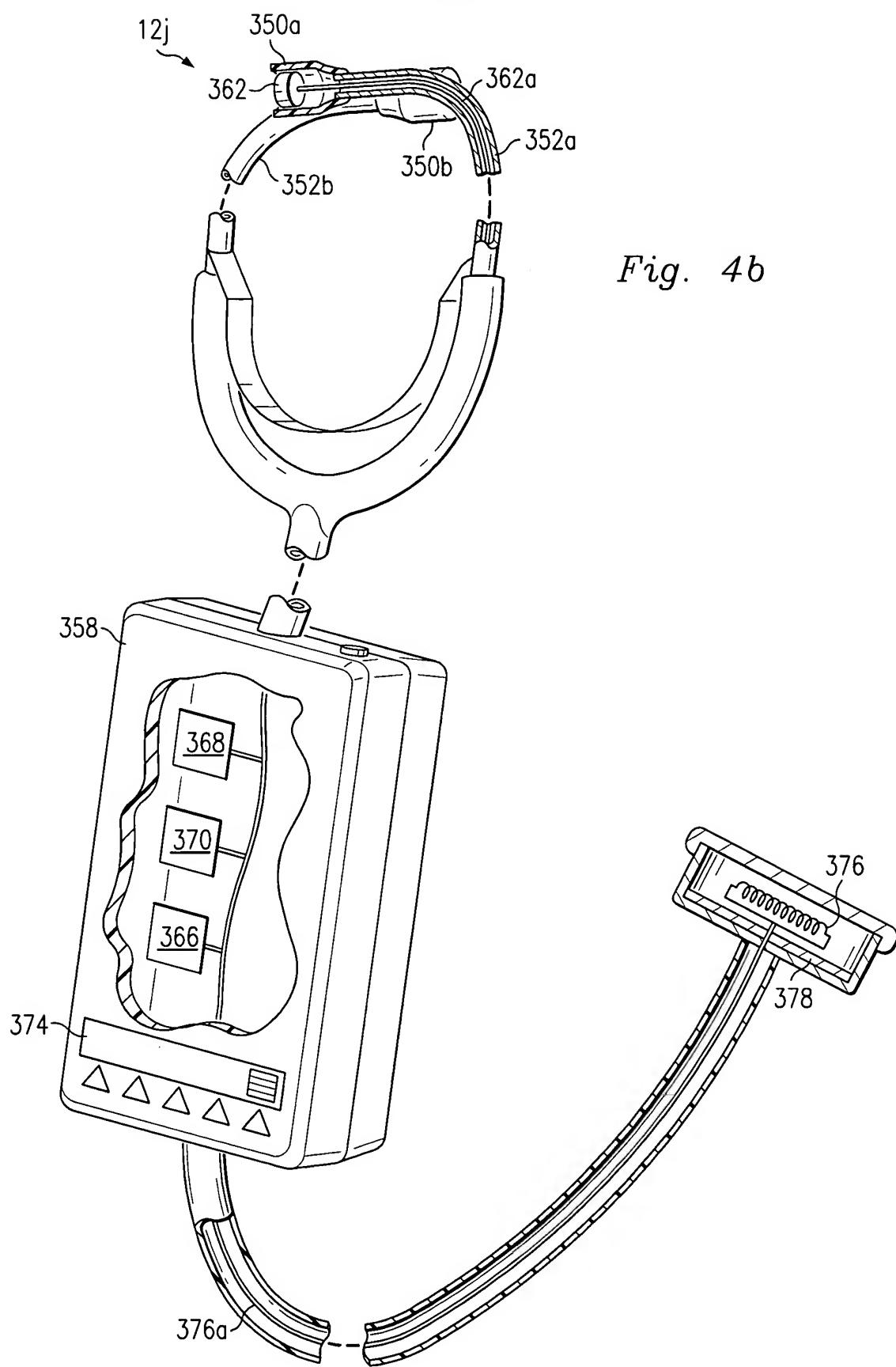
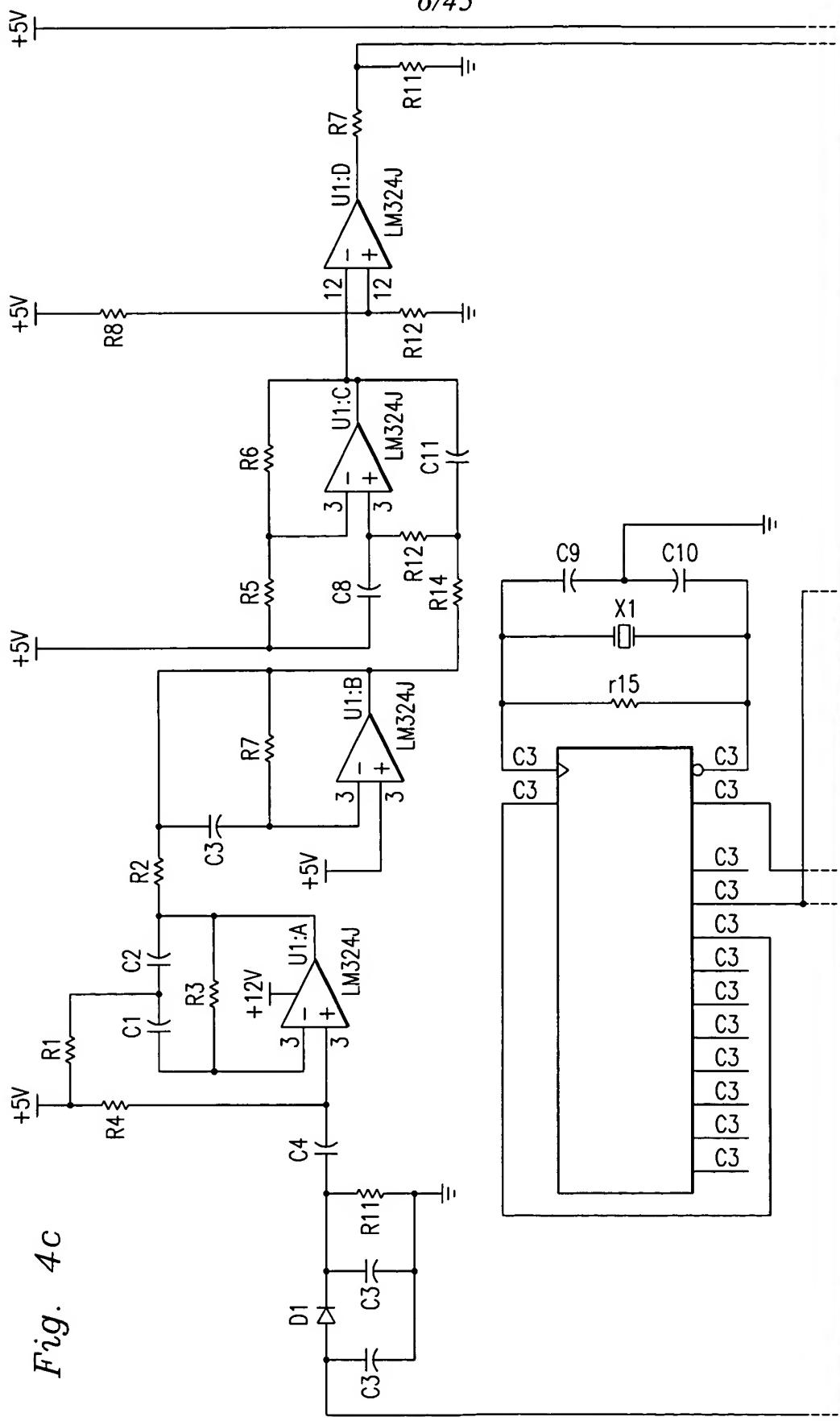


Fig. 4b

6/45



To Fig. 4d

7/45

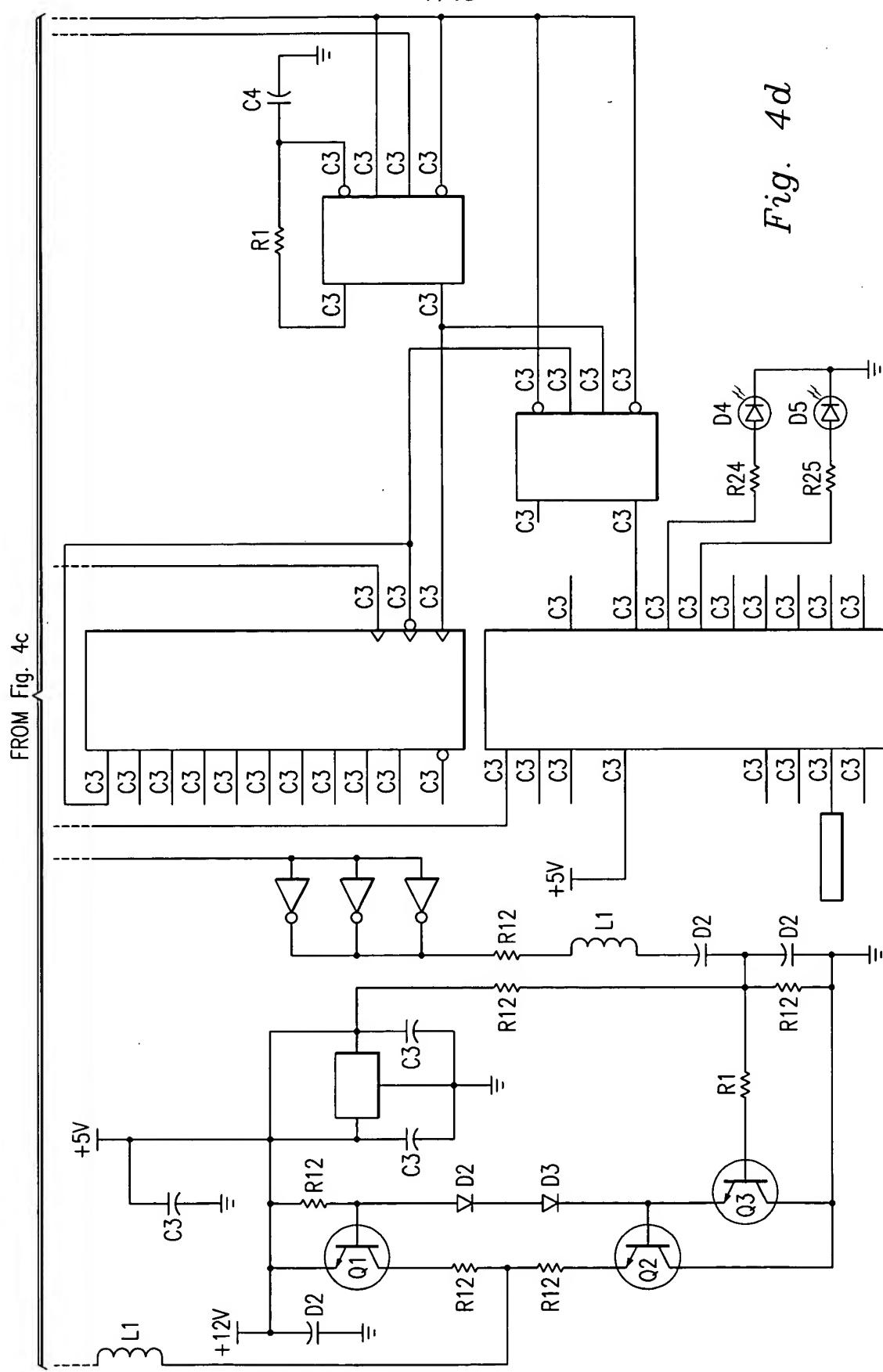
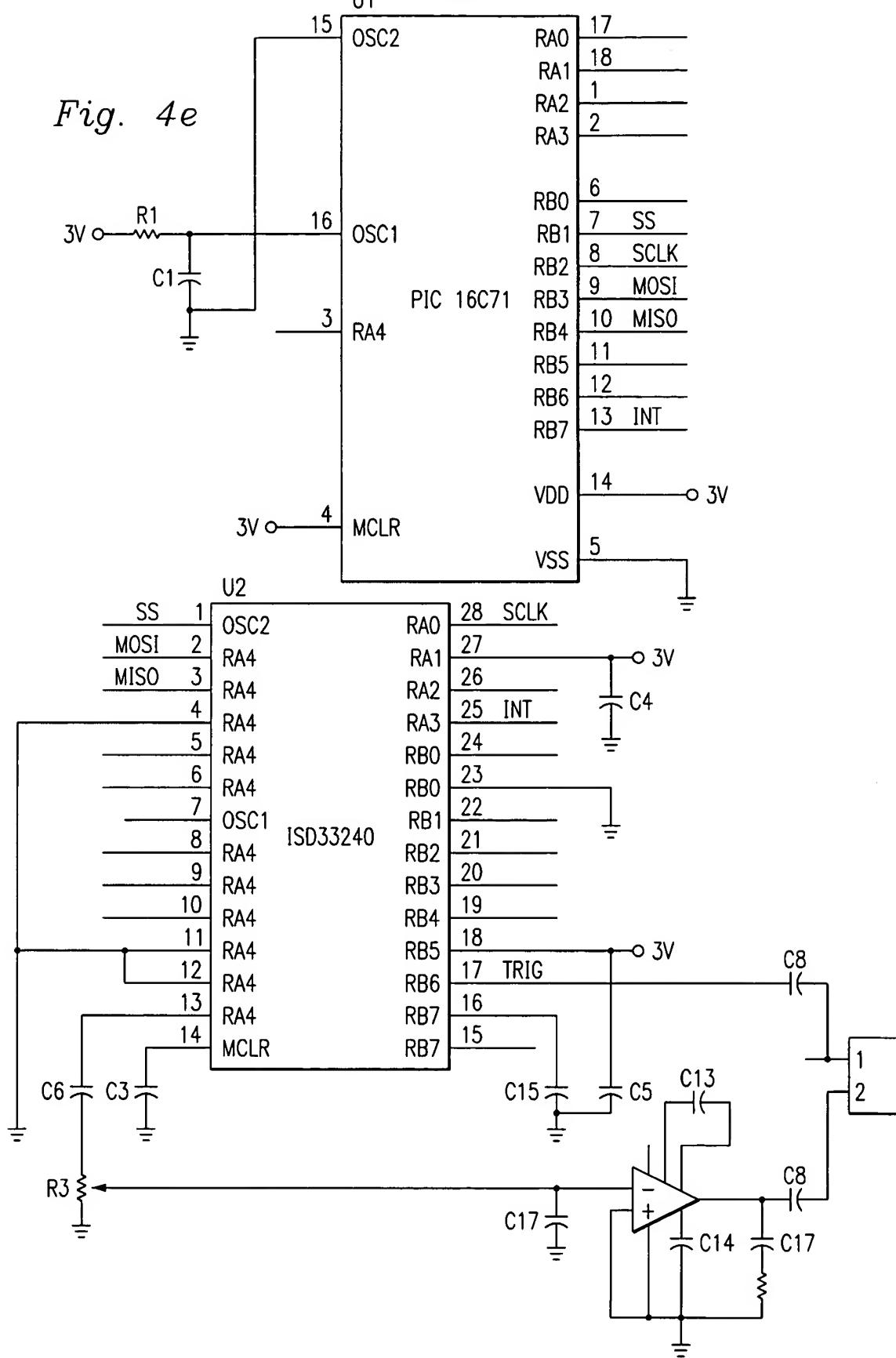
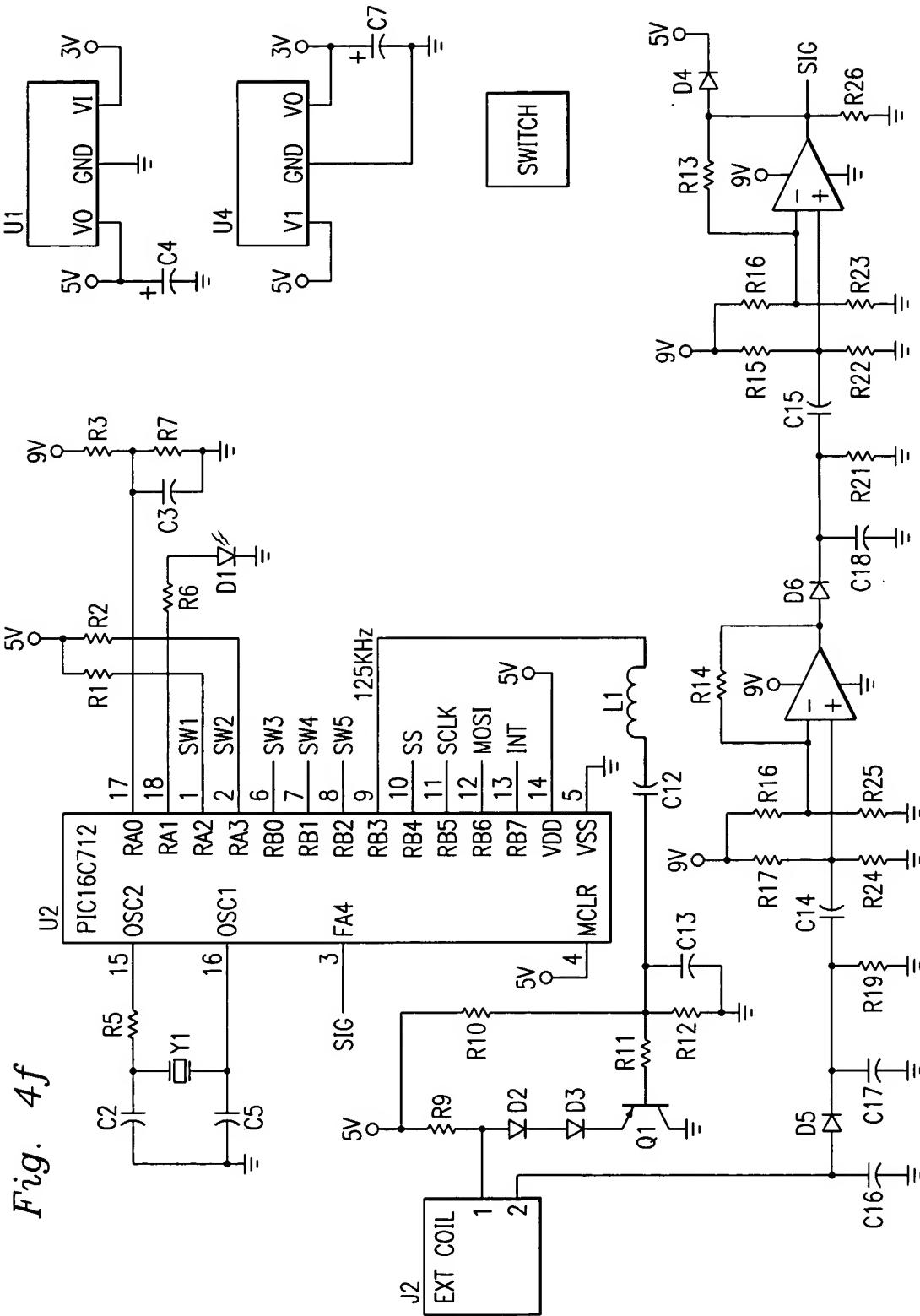


Fig. 4d

8/45

Fig. 4e





10/45

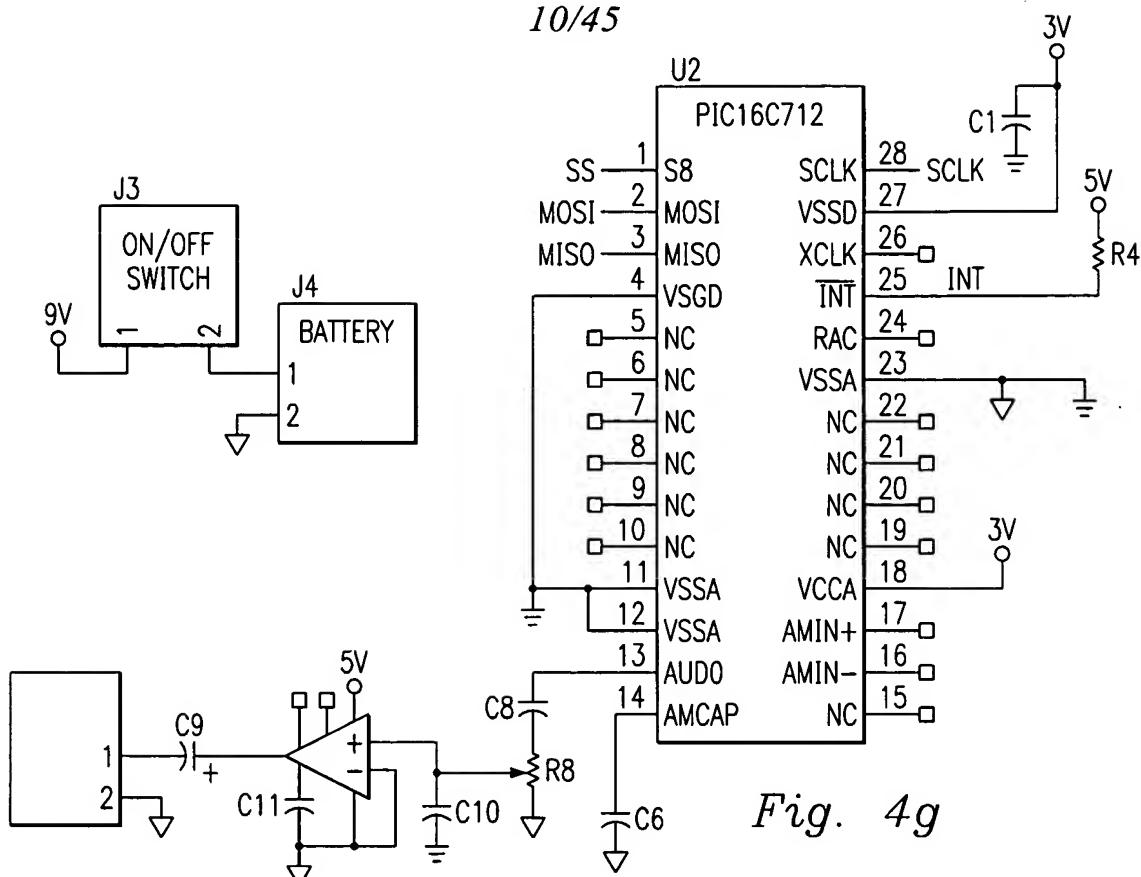


Fig. 4g

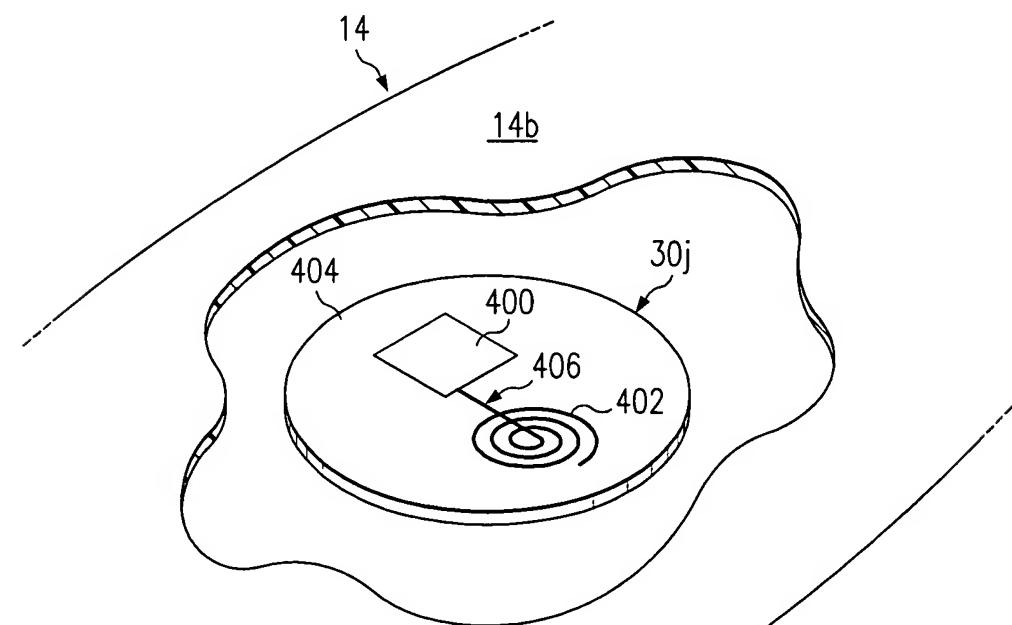
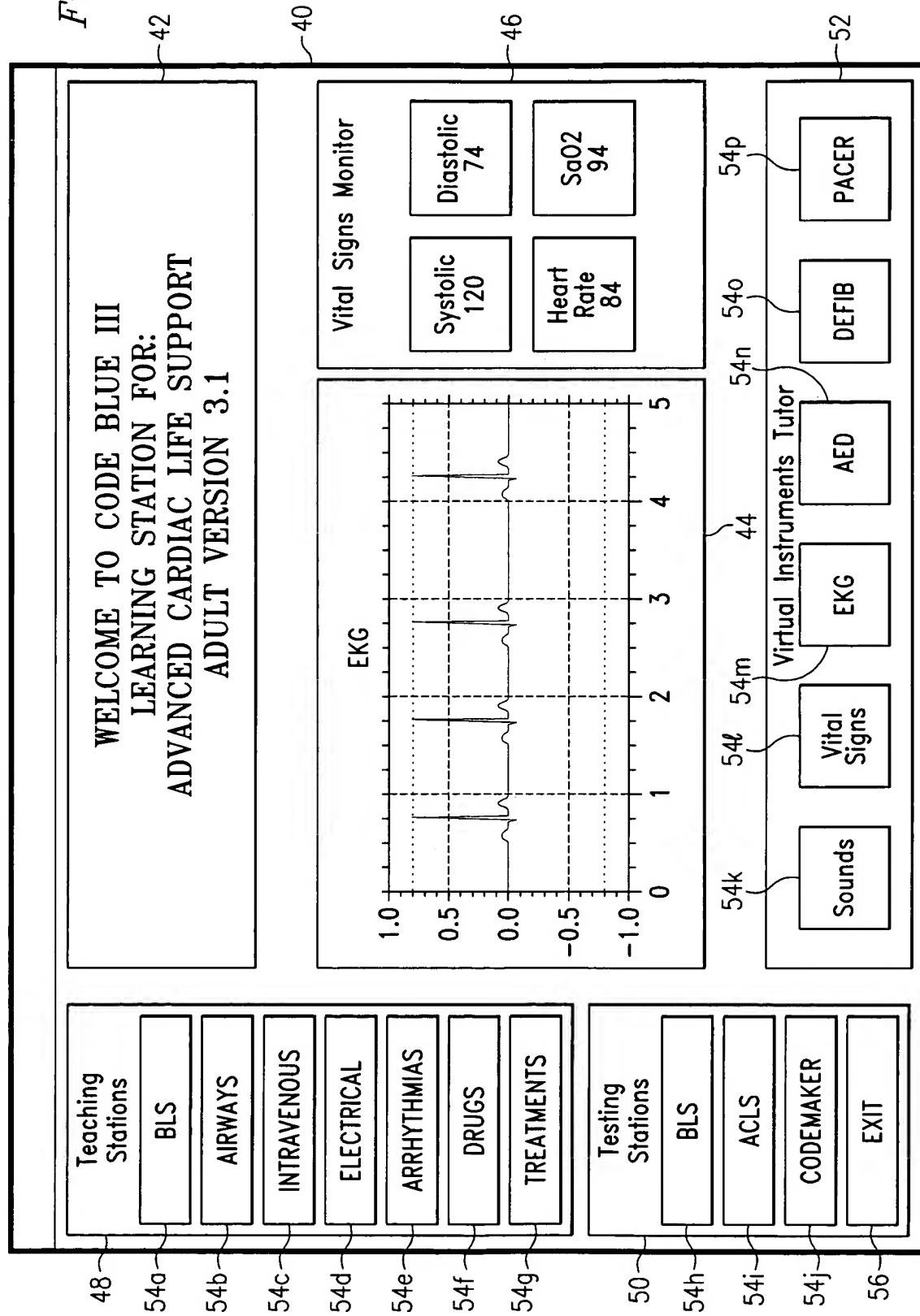


Fig. 4h

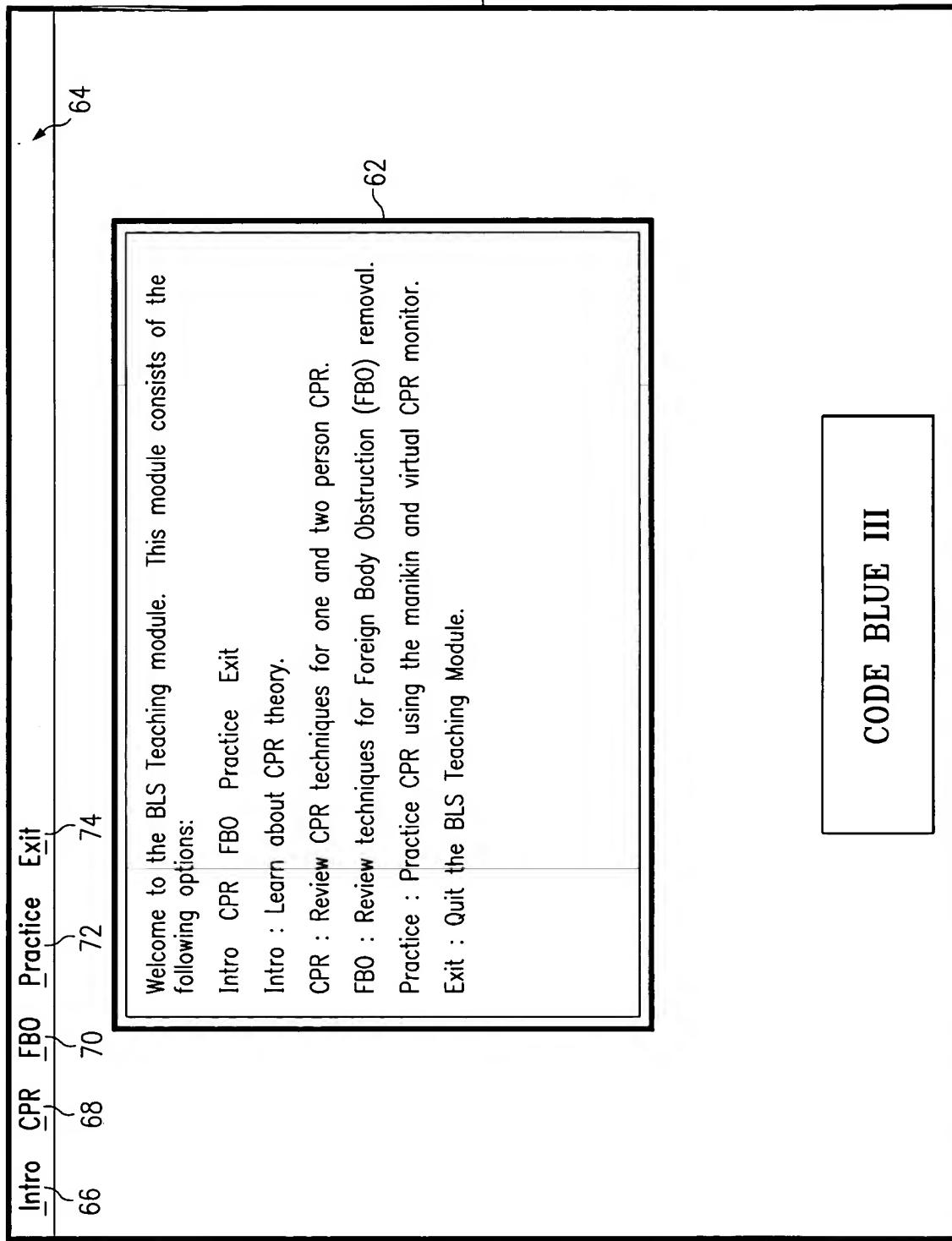
11/45

Fig. 5



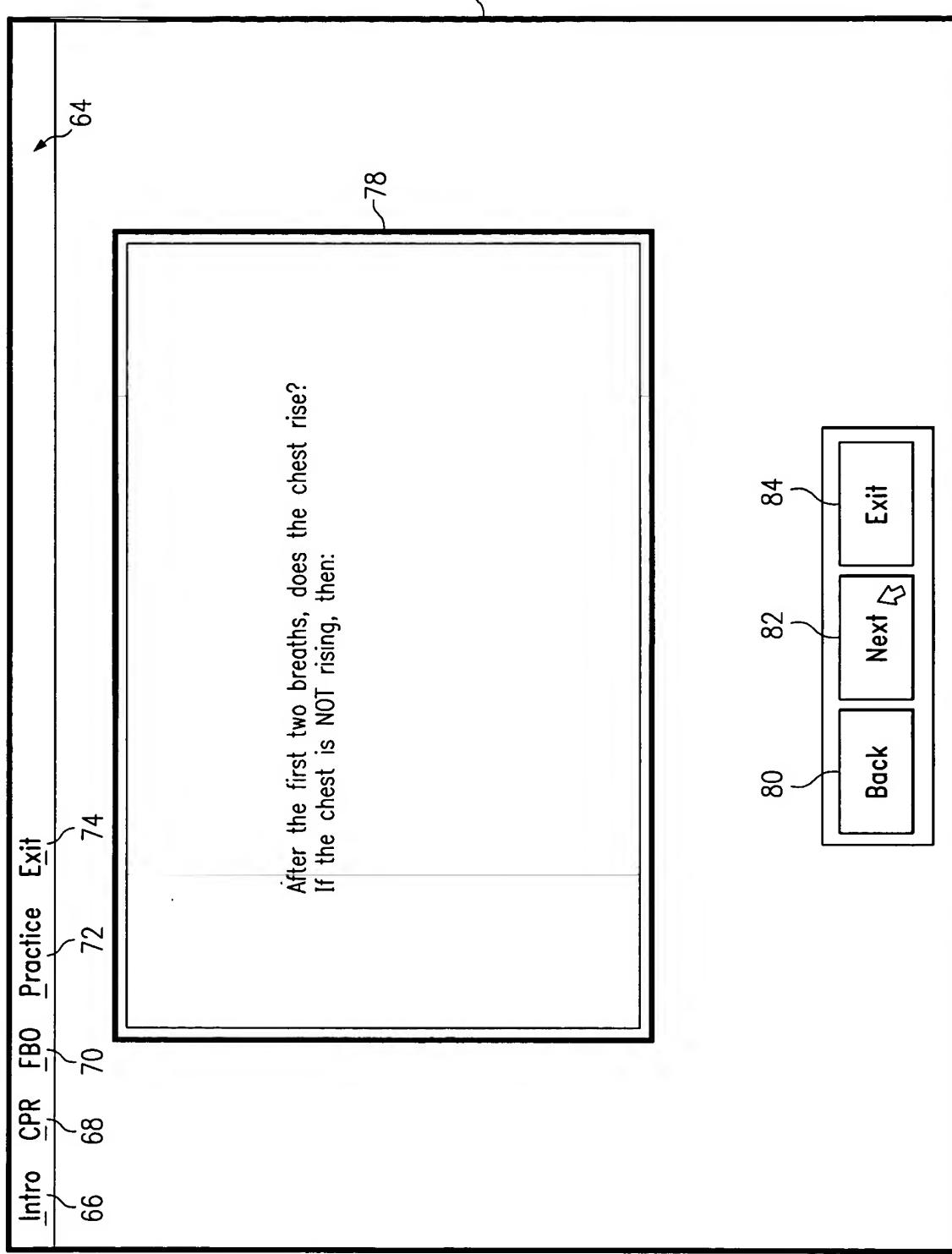
12/45

Fig. 6

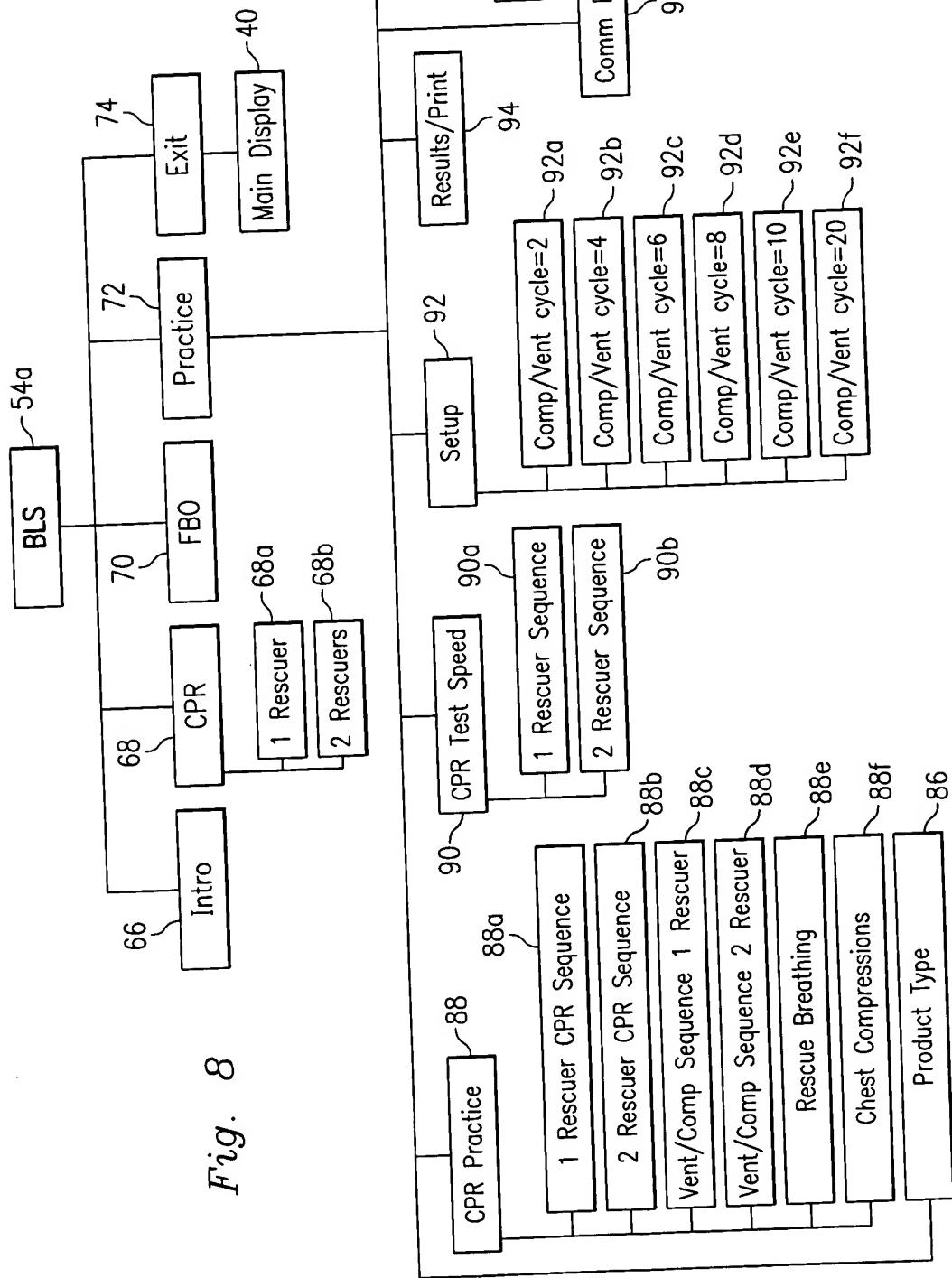


13/45

Fig. 7



14/45



15/45

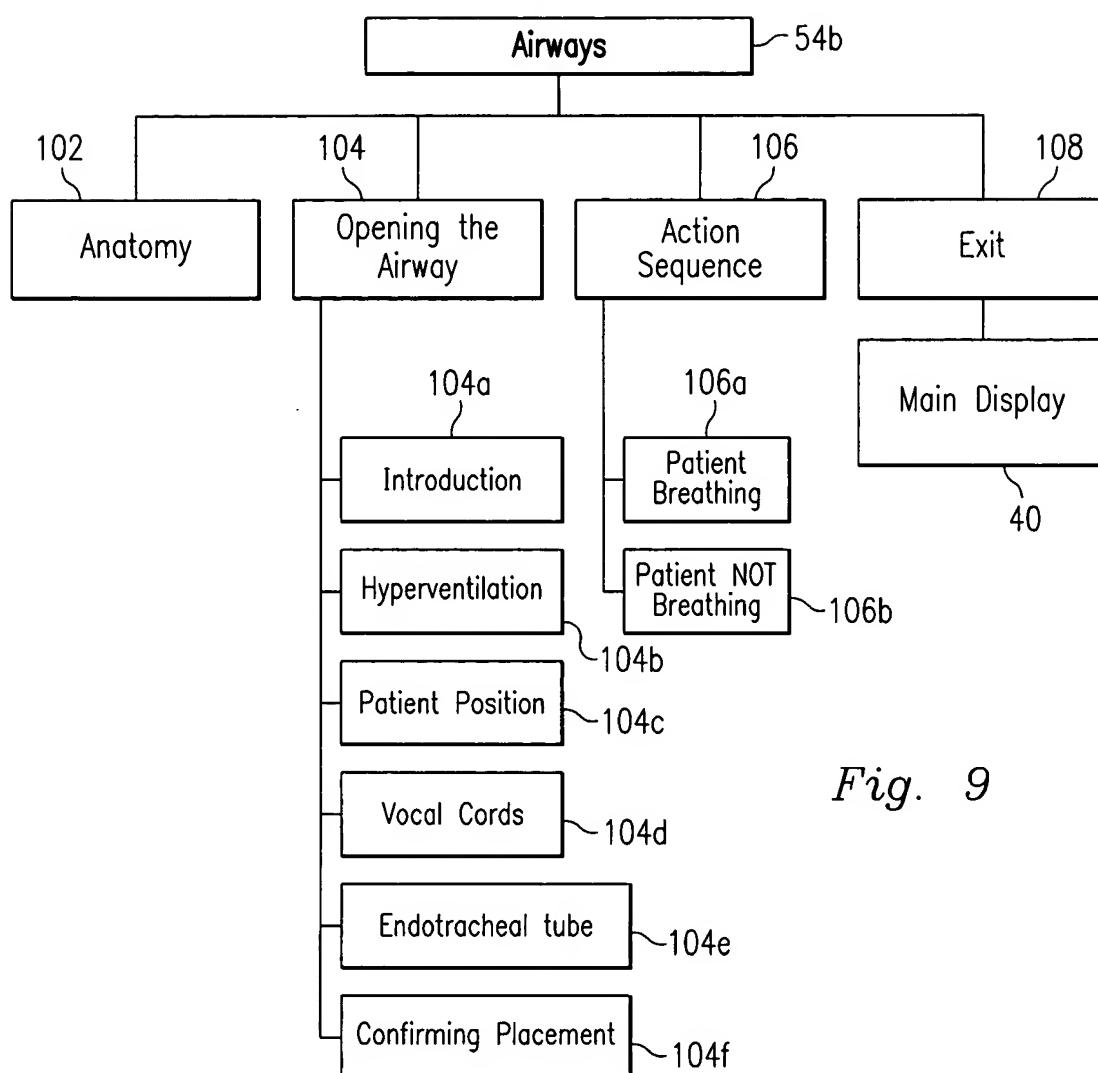
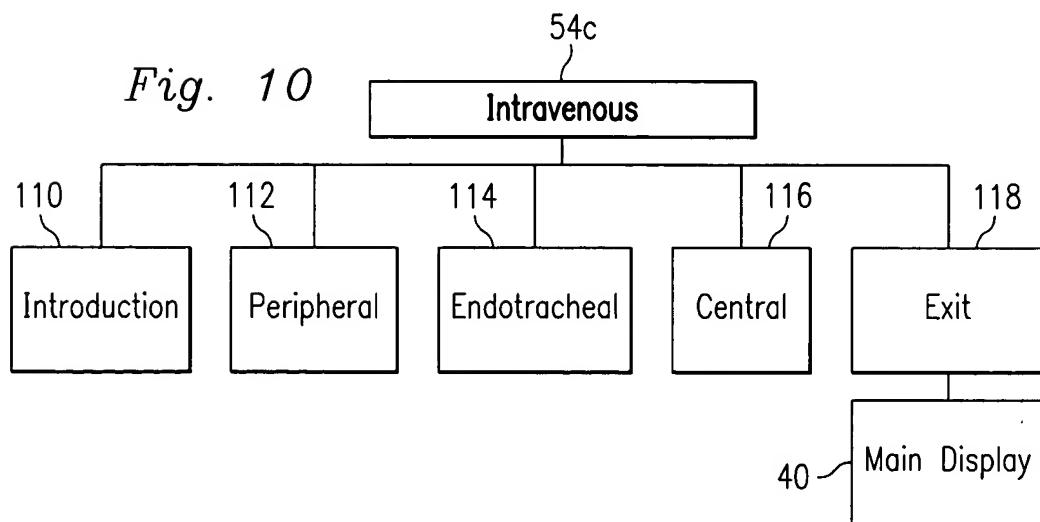


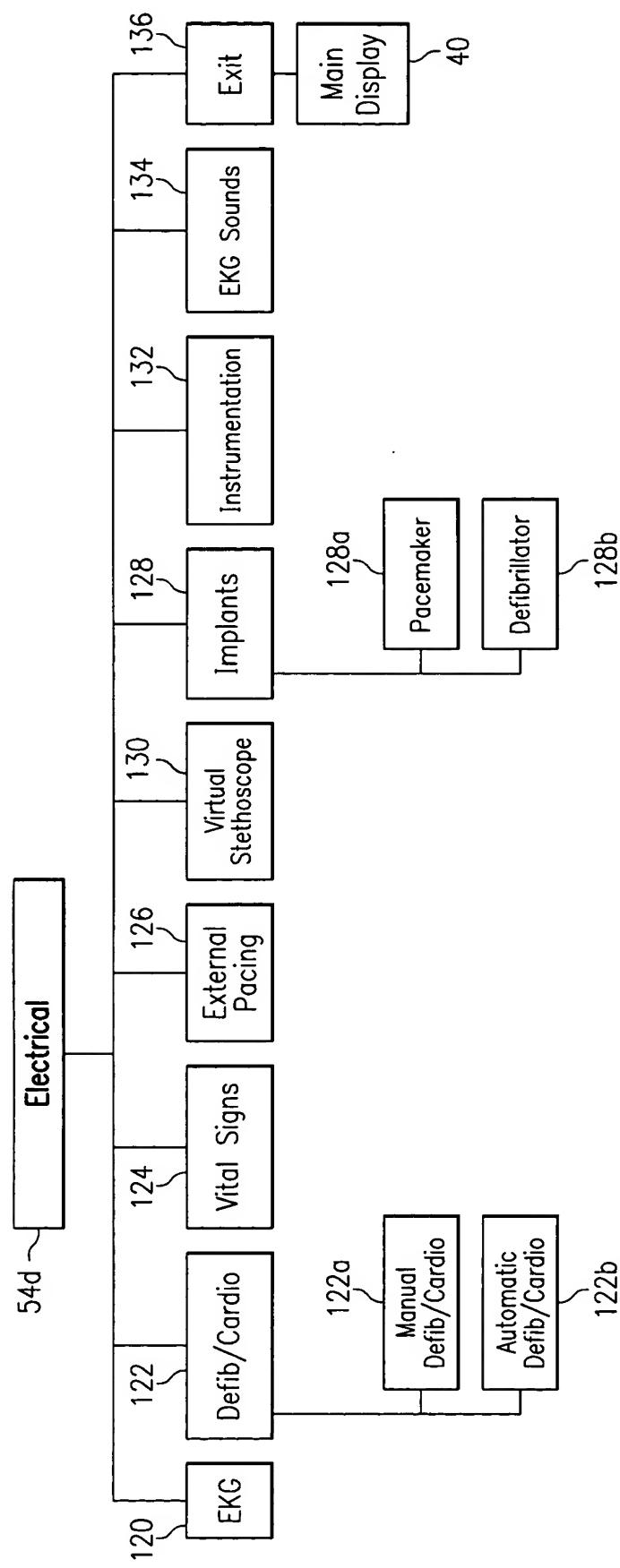
Fig. 9

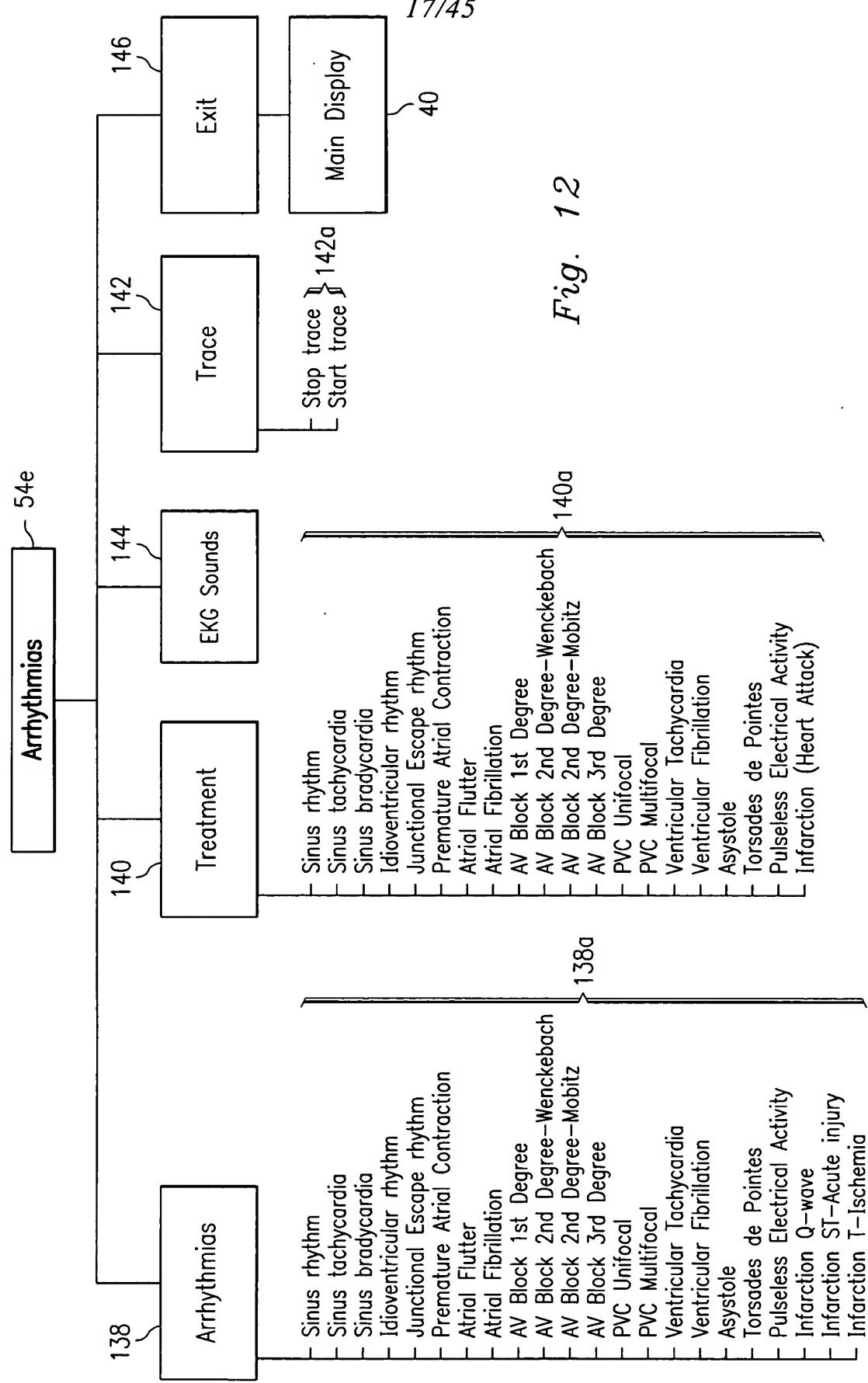
Fig. 10



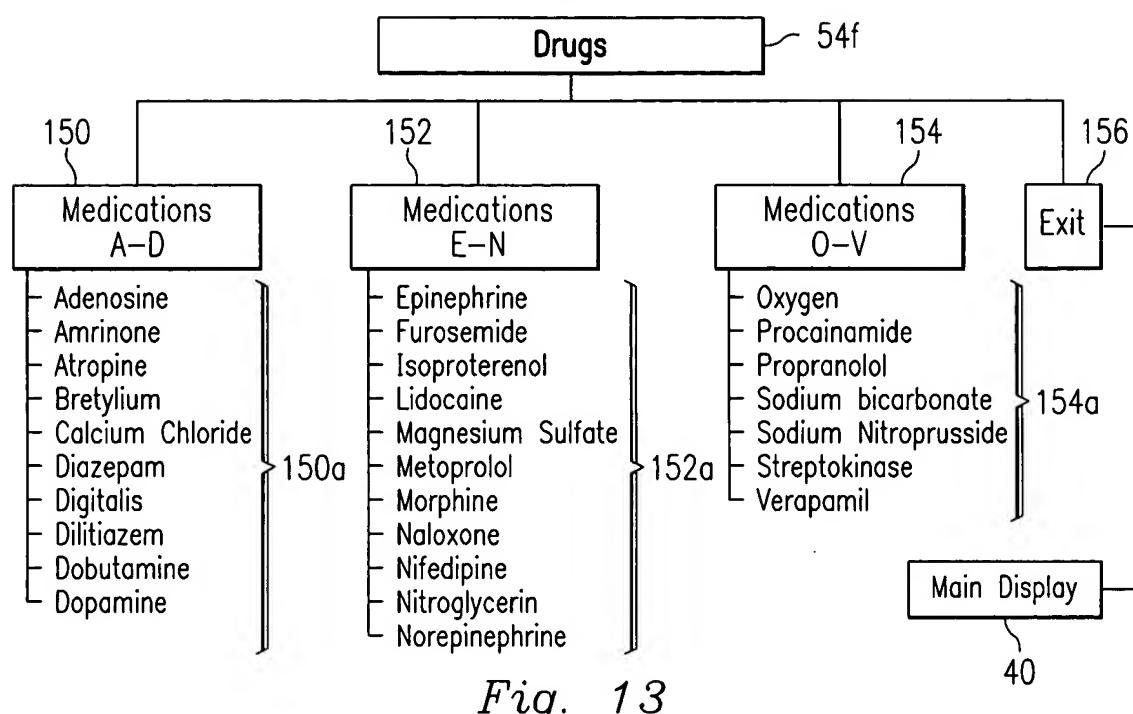
16/45

Fig. 11

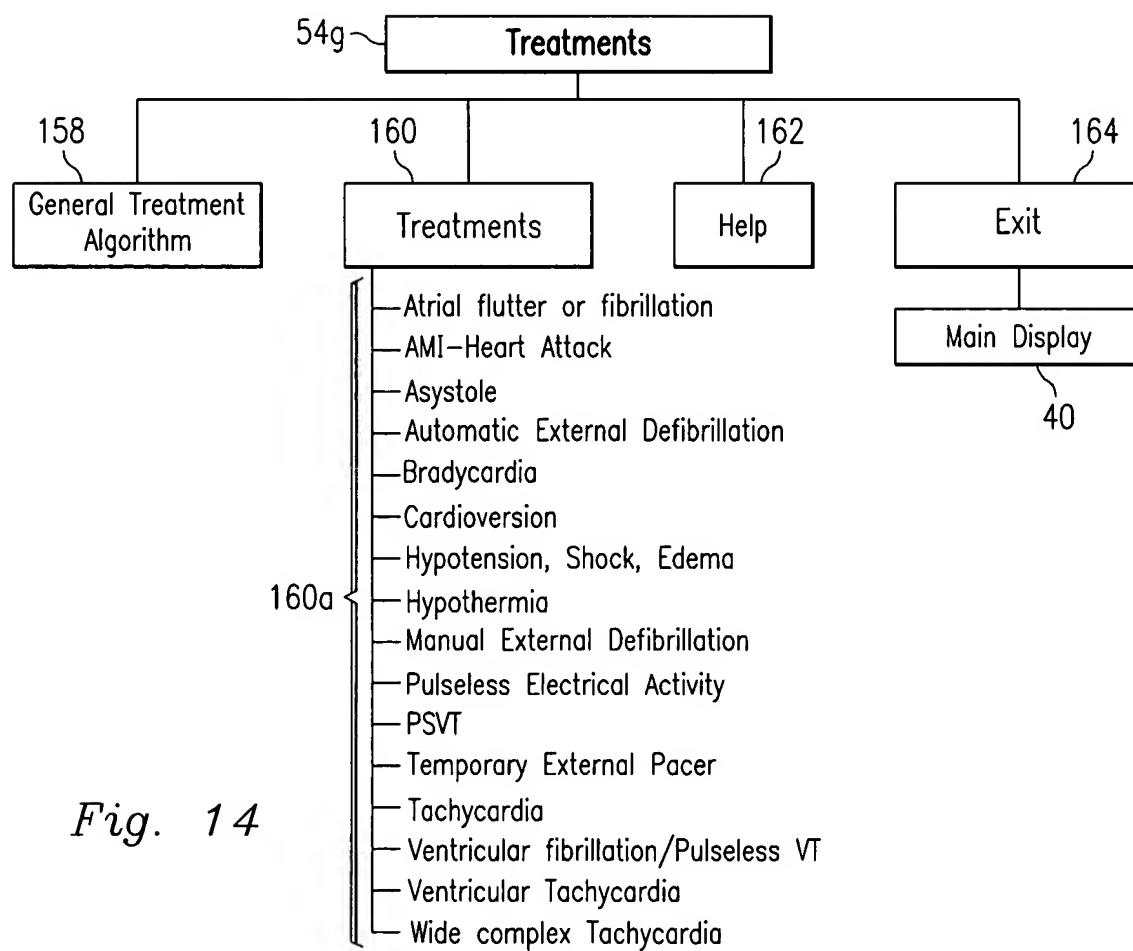




18/45



*Fig.* 13



*Fig. 14*

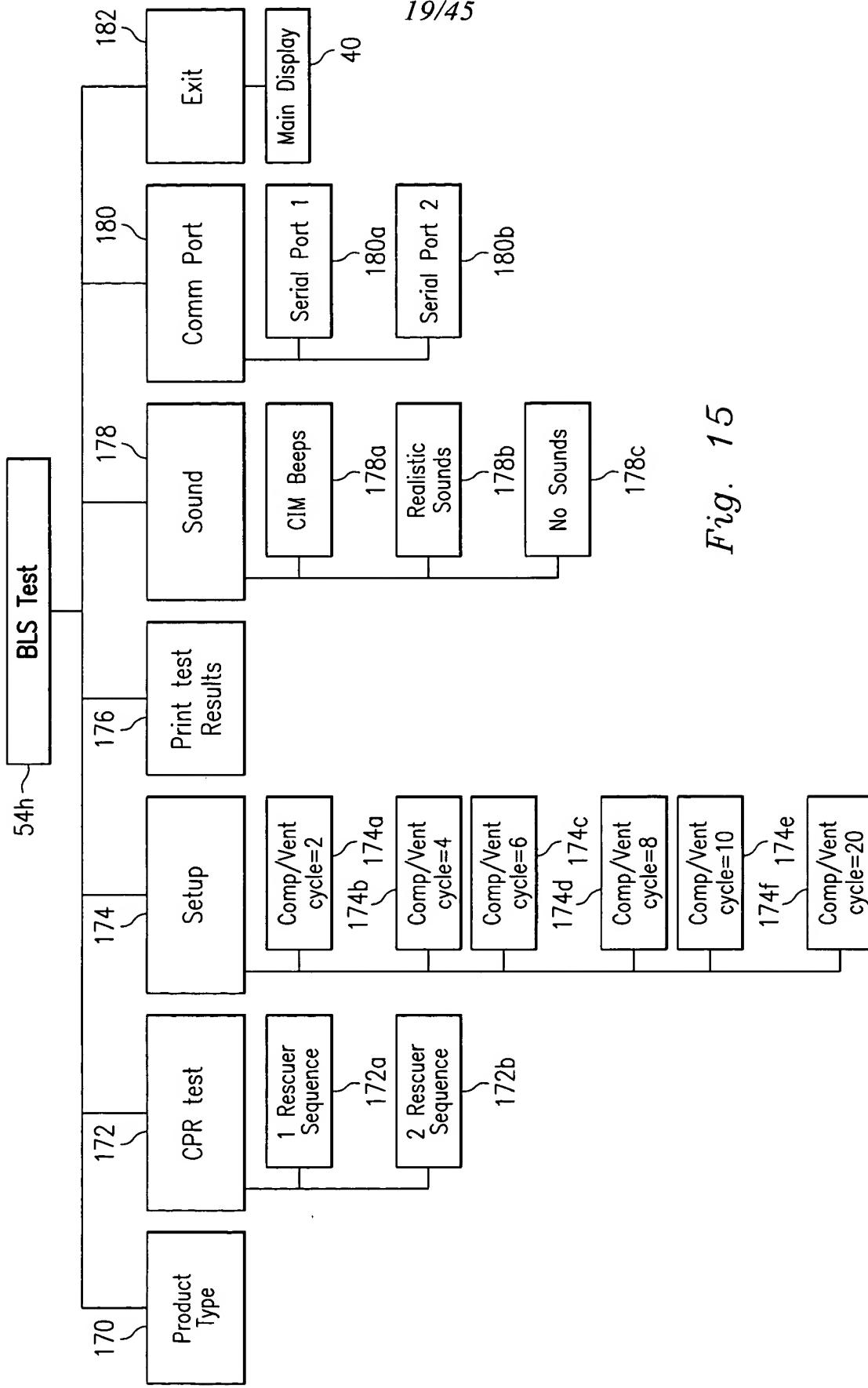


Fig. 15

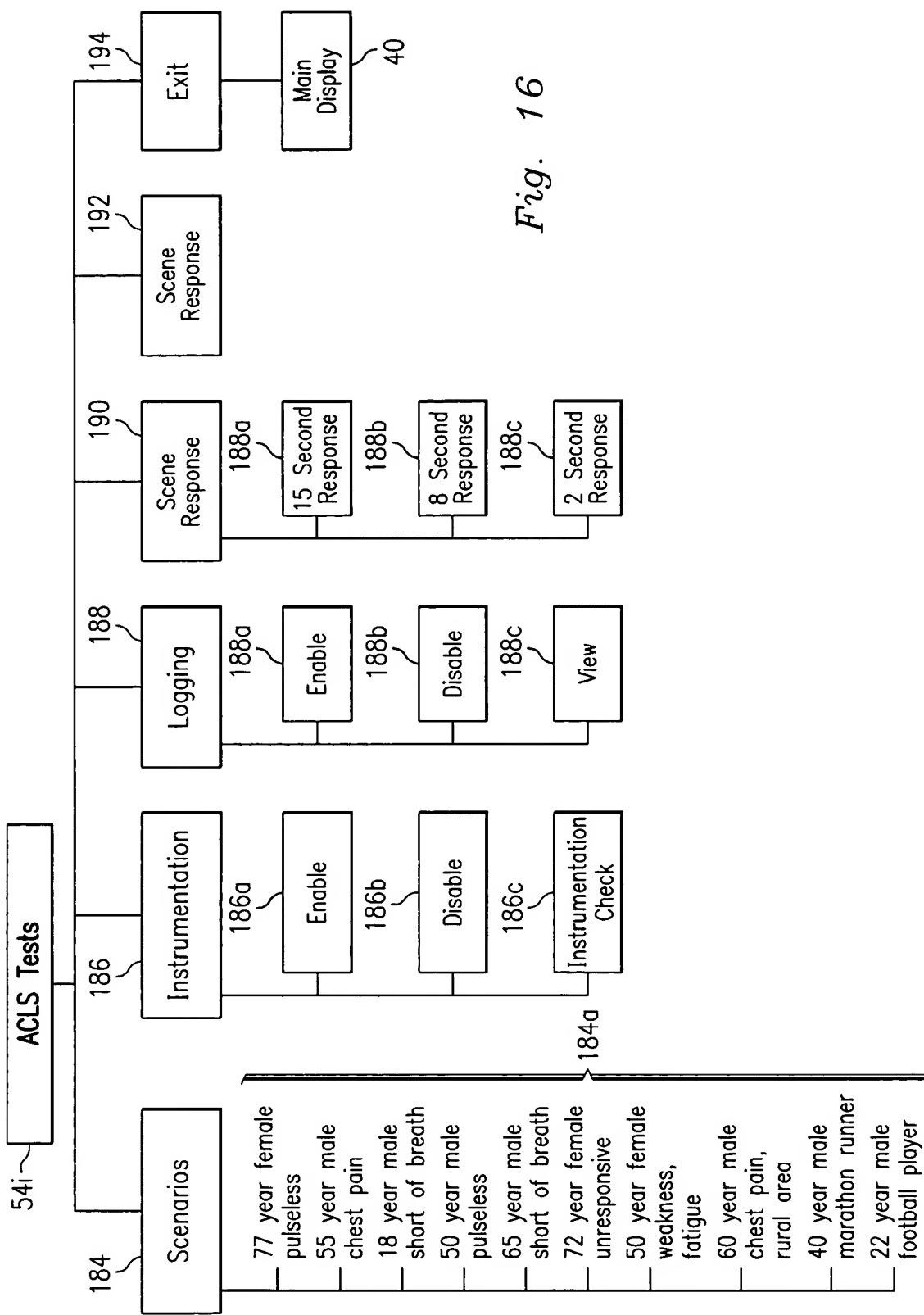
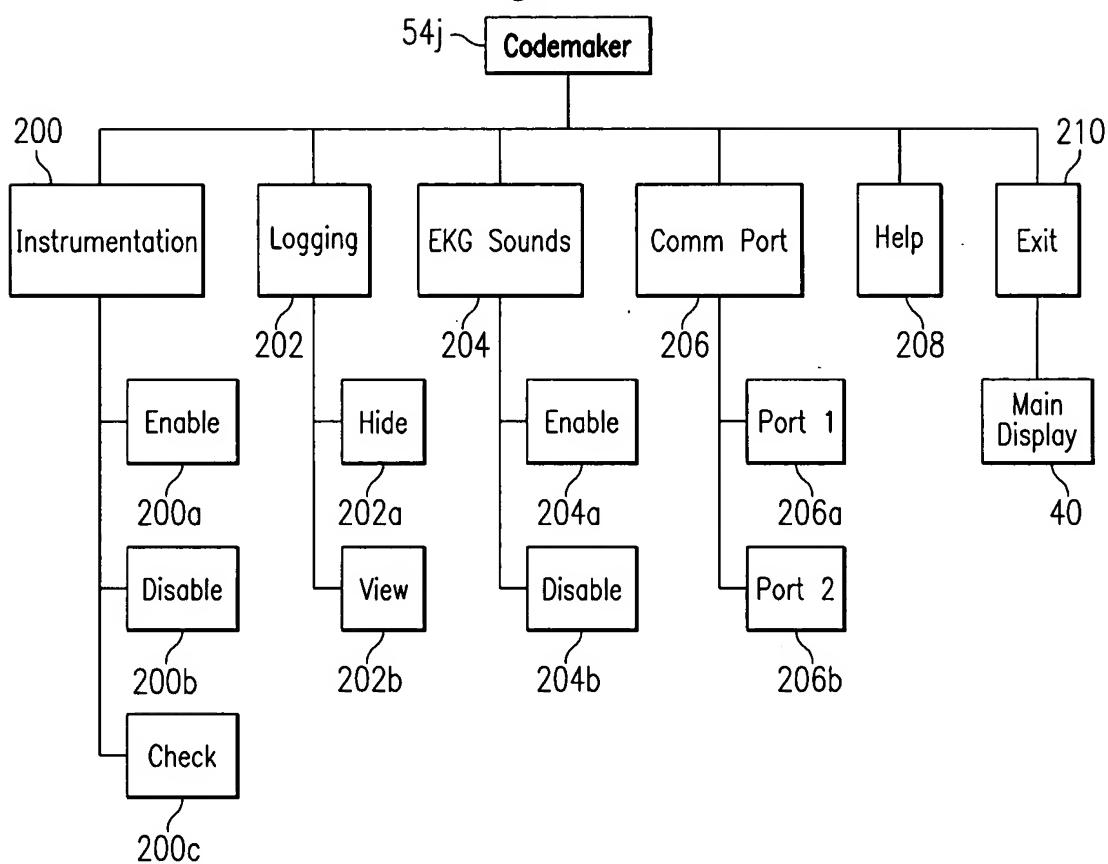


Fig. 16

Fig. 17a



22/45

*Fig. 17b*

Instrumentation	Logging	EKG	Sounds	Comm	Help	Exit
200	202	204	206	208	210	

211a

211

212

213

215

216

217

218

218a 218b 218c 218d 218e 218f 218g

218h 218i 218j 218k 218l 218m 218n

218rad 218fem 218car 218stu 218test 218skin 218temp

Instrument Actions

Preliminary Information

Student Actions

Test Complete

Instrumentation

Logging

EKG

Sounds

Communication

Help

Exit

14 Status Update

Airway Unknown

Breathing Sounds Unknown

Movement Unknown

Respiration Unknown

Circulation Adequacy Unknown

Radial Pulse Unknown

Femoral Pulse Unknown

Carotid Pulse Unknown

Mental Status Unknown

Skin Color Unknown

Skin Temp. Unknown

Vital Signs Monitor

Systolic

Diastolic

Heart Rate

SaO<sub>2</sub>

Total Time

00:00

23/45

Fig. 17c

211

Instrumentation		Preliminary Information		Instructor/CODE Team Info		Treatment History	
First User		Instructor	Date: 8/15/00	Time: 5:19:20 PM			
		Code Leader					
Second User		Student					
Status	<input type="checkbox"/>	Age: 54	[years] ▾	None		Gns Monitor	
Airway	<input checked="" type="checkbox"/>			<input type="checkbox"/> Oral Airway	<input type="checkbox"/> Nasal Airway	<input type="checkbox"/> Diastolic	<input type="checkbox"/> SPO2
Breathing	<input checked="" type="checkbox"/>	Gender:	<input checked="" type="checkbox"/> Male	<input type="checkbox"/> Nasal Cannula 02	<input type="checkbox"/> Face Mask 02	<input type="checkbox"/> Endotracheal Tube	<input type="checkbox"/> Nasogastric Tube
Sound Movement	<input checked="" type="checkbox"/>	Weight:	115 [kilos] ▾	<input type="checkbox"/> Bag-Valve-Mask	<input type="checkbox"/> CPR	<input type="checkbox"/> Medications	<input type="checkbox"/> Other
Respiration	<input checked="" type="checkbox"/>					Time: 0:00	
Circulation	<input checked="" type="checkbox"/>	Unresponsive	<input type="checkbox"/> Not Breathing	<input type="checkbox"/> Found Down	<input type="checkbox"/> Found Down	<input type="checkbox"/> (Other) ▾	<input type="checkbox"/> Time: 5 minutes ago ▾
Adequacy	<input type="checkbox"/>	No Pulse	<input checked="" type="checkbox"/> Found Down	<input type="checkbox"/> History of Heart Problems	<input type="checkbox"/> History of Lung Problems	<input type="checkbox"/> (Other) ▾	<input type="checkbox"/> Time: 5 minutes ago ▾
Radial Pulse	<input type="checkbox"/>	Femoral Pulse	<input type="checkbox"/>	<input type="checkbox"/> Stroke	<input type="checkbox"/> Hypothermia	<input type="checkbox"/> (Other) ▾	<input type="checkbox"/> Time: 5 minutes ago ▾
Carotid Pulse	<input type="checkbox"/>	Mental Status	<input type="checkbox"/> IV Fluids	<input type="checkbox"/> Accept Settings	<input type="checkbox"/> Skin Color	<input type="checkbox"/> (Other) ▾	<input type="checkbox"/> Time: 5 minutes ago ▾
Skin Temp.	<input type="checkbox"/>						

24/45

Fig. 17d

<u>Instrumentation</u>	<u>Logging</u>	<u>EKG Sounds</u>	<u>Comm</u>	<u>Help</u>	<u>Exit</u>

<u>14 Status Update</u>	<u>Instructor Options - Custom Scenario</u>				
<u>Airway</u> Adequate to Ventila	Vital Signs				
<u>Breathing</u> Sounds Bilateral	Heart Rate 90	Systolic Pressure 155	Diastolic Pressure 70	Temperature 26	SaO <sub>2</sub>
Movement Symmetrical	Respiration 3	71	Cardiac Rhythm	Celsius	
Respiration Controlled	Oxygen Saturation	Normal Sinus Rhythm	Cesius		
<u>Circulation</u>	<u>Accept Changes</u>				
Adequacy Compromised	Radial Pulse Yes	Femoral Pulse No	Carotid Pulse Yes	Mental Status Alert	Test Complete
Compromised	Yes	No	Yes	Alert	Complete

<u>211</u>	<u>213</u>	<u>215</u>	<u>216</u>	<u>218f</u>	
Vital Signs Monitor		Total Time 03:45		Instructor Actions	
Systolic Diastolic		SaO <sub>2</sub>		Student Actions	
Heart Rate		Celsius		Preliminary Information	
Normal Sinus Rhythm		Cesius		Test Complete	
Accept Changes		Cesius		Skin Color Pale Cool	
		Cesius			

25/45

Fig. 17e

211

Instrumentation	Logging	EKG Sounds	Comm	Help	Exit																								
<b>14 Status Update</b> <b>Airway</b> Adequate to Ventila <hr/> <b>Breathing</b> Sounds Bilateral <b>Movement</b> Symmetrical <b>Respiration</b> Controlled <hr/> <b>Circulation</b> Adequacy Compromised <b>Radial Pulse</b> Yes <b>Femoral Pulse</b> No <b>Carotid Pulse</b> Yes <hr/> <b>Mental Status</b> Alert <b>Skin Color</b> Pale <b>Skin Temp.</b> Cool																													
<b>Student Actions</b> <hr/> <table border="1"> <tr> <td>BP/ <input type="checkbox"/> PulseOx</td> <td>Attach <input type="checkbox"/></td> <td>Assess/Perform <input type="checkbox"/></td> <td>Remove <input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> EKG</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Cardioversion</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Defibrillation</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> External</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Pacer</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <hr/> <input type="button" value="OK"/>						BP/ <input type="checkbox"/> PulseOx	Attach <input type="checkbox"/>	Assess/Perform <input type="checkbox"/>	Remove <input type="checkbox"/>	<input type="checkbox"/> EKG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Cardioversion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Defibrillation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> External	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Pacer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
BP/ <input type="checkbox"/> PulseOx	Attach <input type="checkbox"/>	Assess/Perform <input type="checkbox"/>	Remove <input type="checkbox"/>																										
<input type="checkbox"/> EKG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																										
<input type="checkbox"/> Cardioversion	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																										
<input type="checkbox"/> Defibrillation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																										
<input type="checkbox"/> External	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																										
<input type="checkbox"/> Pacer	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>																										
<b>Vital Signs Monitor</b> <hr/> <table border="1"> <tr> <td>Systolic <input type="checkbox"/></td> <td>Diastolic <input type="checkbox"/></td> </tr> <tr> <td>Heart Rate <input type="checkbox"/></td> <td>SaO<sub>2</sub> <input type="checkbox"/></td> </tr> </table> <hr/> <b>Total Time</b> 05:07						Systolic <input type="checkbox"/>	Diastolic <input type="checkbox"/>	Heart Rate <input type="checkbox"/>	SaO <sub>2</sub> <input type="checkbox"/>																				
Systolic <input type="checkbox"/>	Diastolic <input type="checkbox"/>																												
Heart Rate <input type="checkbox"/>	SaO <sub>2</sub> <input type="checkbox"/>																												
<b>Virtual Instruments</b> <hr/> <table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <hr/> <b>213</b>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>														
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<b>215</b>																													
<b>216</b> <hr/> <table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <hr/> <table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <hr/> <b>218m</b>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>								
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<b>Instructor Actions</b> <hr/> <table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <hr/> <b>Preliminary Information</b> <hr/> <table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <hr/> <b>Student Actions</b> <hr/> <table border="1"> <tr> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <hr/> <b>Test Complete</b>						<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												
<input type="checkbox"/>	<input type="checkbox"/>																												

26/45

Fig. 17f

-211

27/45

Fig. 18

222

222a

222b

222c

222d

224

226

228

80

82

84

Exit

Virtual Stethoscope

Heart Sounds

Front Sounds

Lung Sounds

ON

Front Sounds

Tracheal

Expiration sounds are louder, have a higher pitch, and are of longer duration than during inspiration. The silent period or pause following expiration is longer than the one between expiration and inspiration.

click to close

Starr-Edwards Valve

Friction Rub-3 Component

Crackles, Coarse

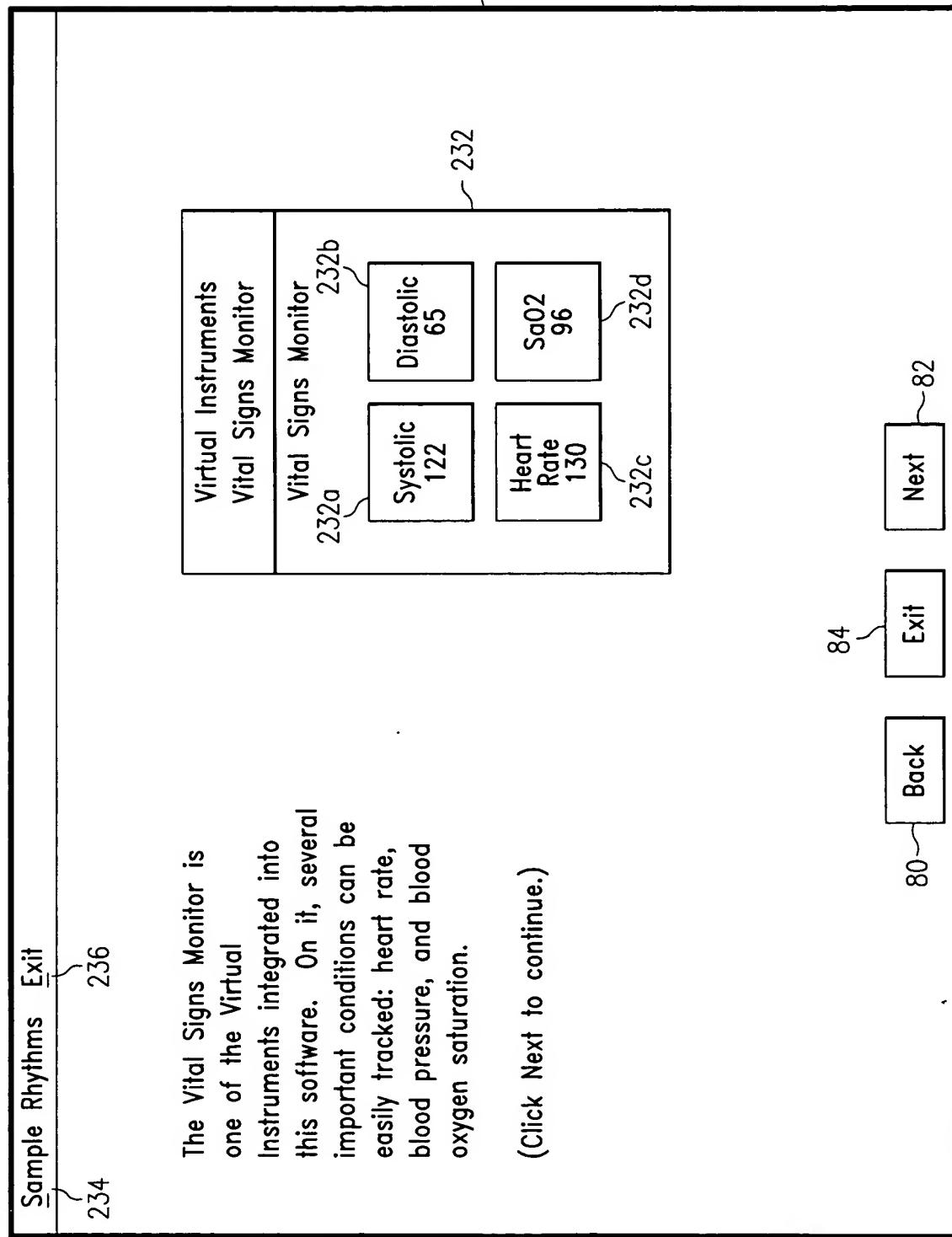
Pulmonary Edema

Fig. 18 shows a screenshot of a virtual stethoscope interface. At the top left is a button labeled 'Exit'. Below it is a large diagram of a human torso from the neck down to the abdomen, with a stethoscope placed over the chest area. The number '224' is written next to the diagram, and '226' is written above the stethoscope. To the right of the diagram is a box containing several buttons: 'Virtual Stethoscope', 'Heart Sounds', 'Front Sounds', 'Lung Sounds', and an 'ON' button. The 'ON' button has a small circle with an 'X' inside it. Below these buttons is a text box with the heading 'Tracheal' and a detailed description of tracheal sounds. To the right of the text box is another box containing three buttons: 'Starr-Edwards Valve', 'Friction Rub-3 Component', 'Crackles, Coarse', and 'Pulmonary Edema'. Below this box is a button labeled 'click to close'. On the far right, there are three more buttons: 'Back', 'Exit', and 'Next'. Above the 'Next' button is the number '82'. Above the 'Exit' button is the number '80'. Above the 'Back' button is the number '84'. The entire interface is labeled with the number '222' at the top left.

To use the Virtual Stethoscope, first click the ON/OFF button. Lists of heart and lung sounds will appear below the labels for Heart Sounds and Lung Sounds, respectively. To select a desired sound, click on the entry in the appropriate list with the pointer. The sound name will be highlighted, and the picture to the left will display a view of the upper torso.

28/45

Fig. 19



29/45

Fig. 20

244      246      248      242      240

The Virtual EKG Monitor is one of the Virtual Instruments integrated into this software. It is used to display the activity of the heart's conduction system. The display is updated with a sweep, cycling from left to right. To use the EKG monitor, click the ON/OFF button, and the sweep will activate.

(Click Next to continue.)

242a

242b

242c

Virtual Instrument Electrocardiograph

EKG

76

ON

80

84

82

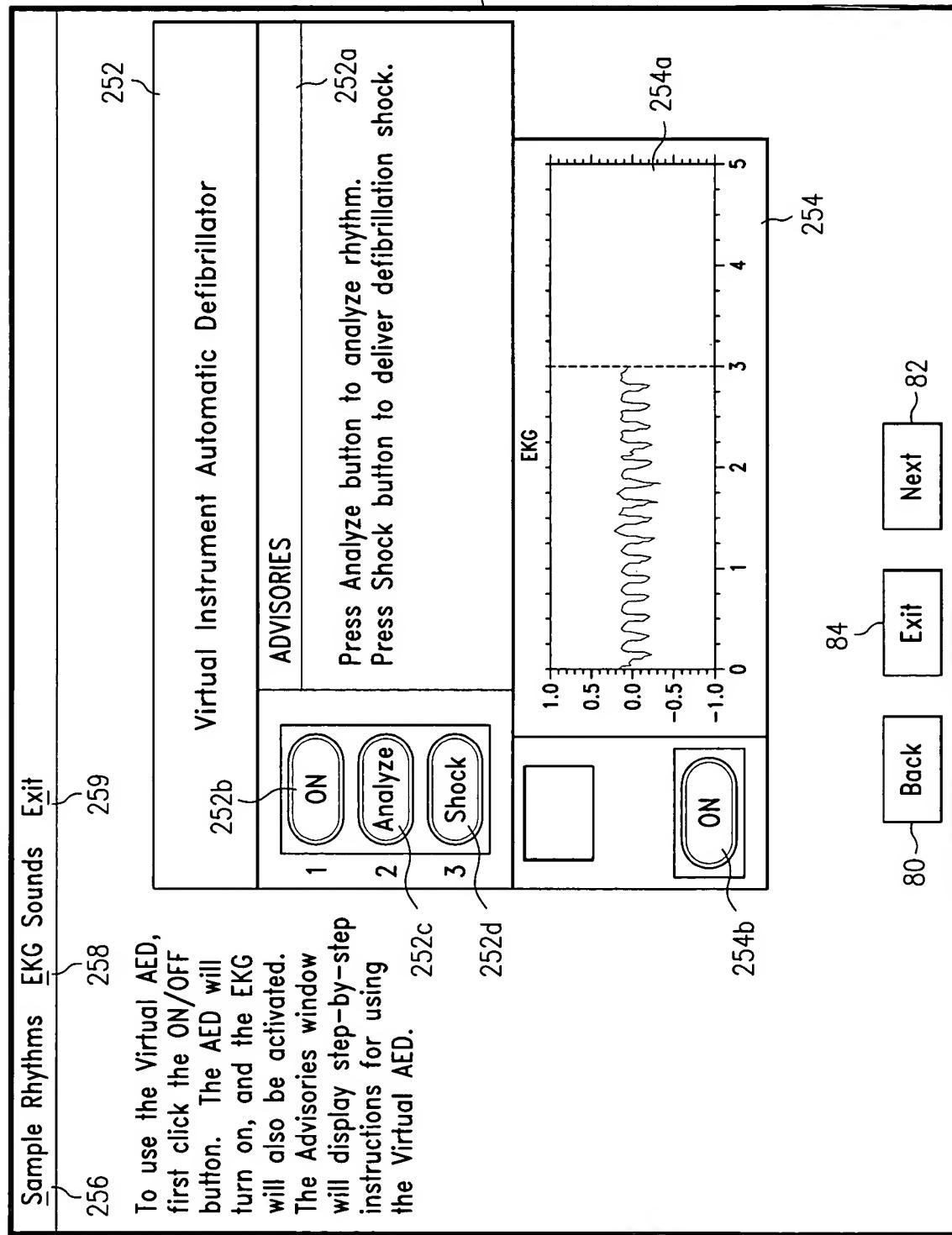
Next

Exit

Back

30/45

Fig. 21



31/35

Fig. 22

To use the Virtual Defibrillator, first click the ON/OFF button. The EKG monitor will activate, and the Advisories window will display step-by-step instructions. These instructions will help the student use the Virtual Defibrillator.

Sample Rhythms    EKG Sounds    Exit

264                  266                  268

Virtual Instrument Manual Defibrillator

EKG

262a

262b

262c

262d

262e

262f

262g

262h

262i

260

84

80

Back

Exit

Next

262

ON

Energy Select

Charge

Shock

Sync

HR

BPM

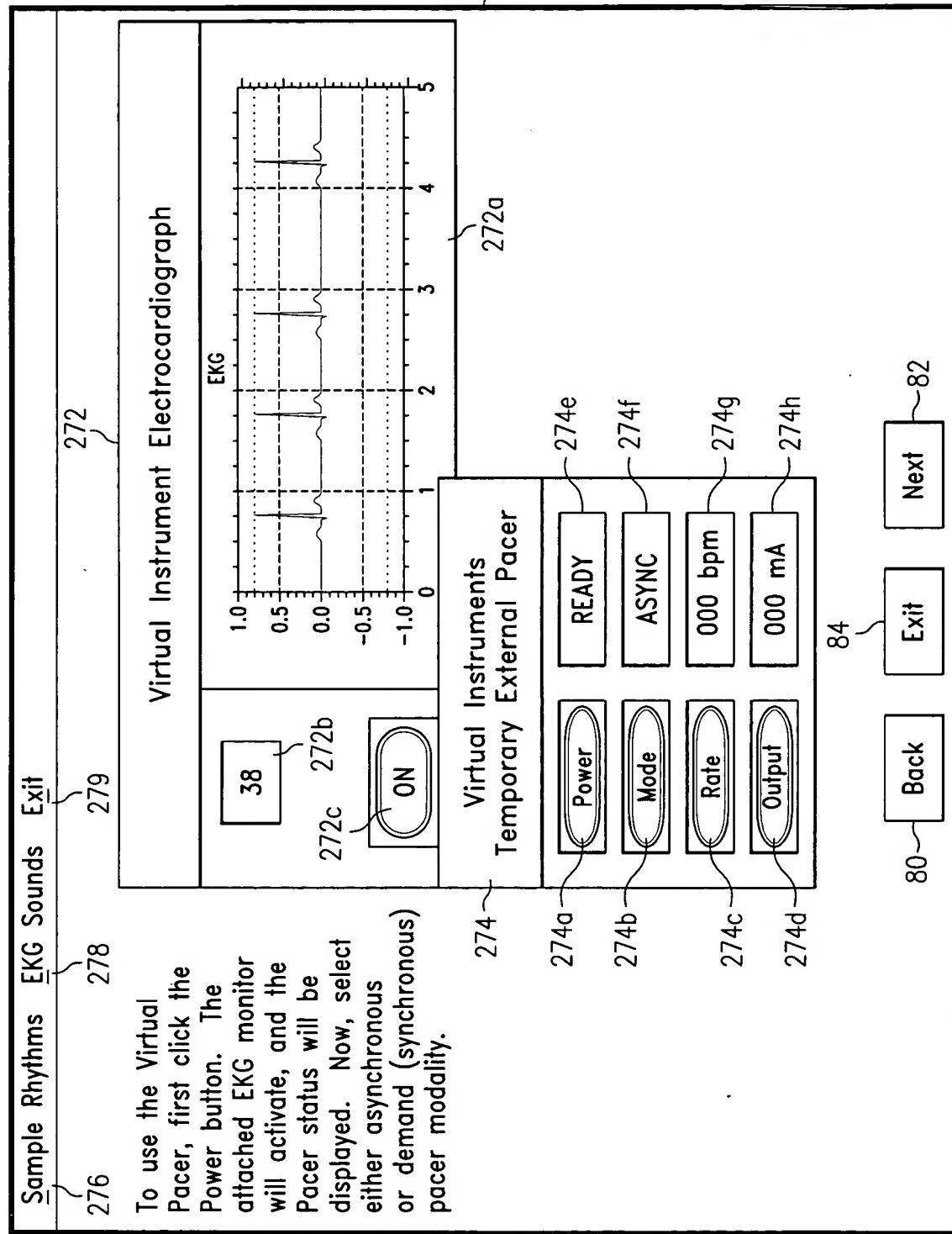
Selected [000] J

ADVISORIES

Press Energy Select button to select energy level.  
Press Charge button to charge defibrillator.  
Press Sync button to synchronize shock energy.  
Press Shock button to deliver defibrillation shock.

32/45

Fig. 23



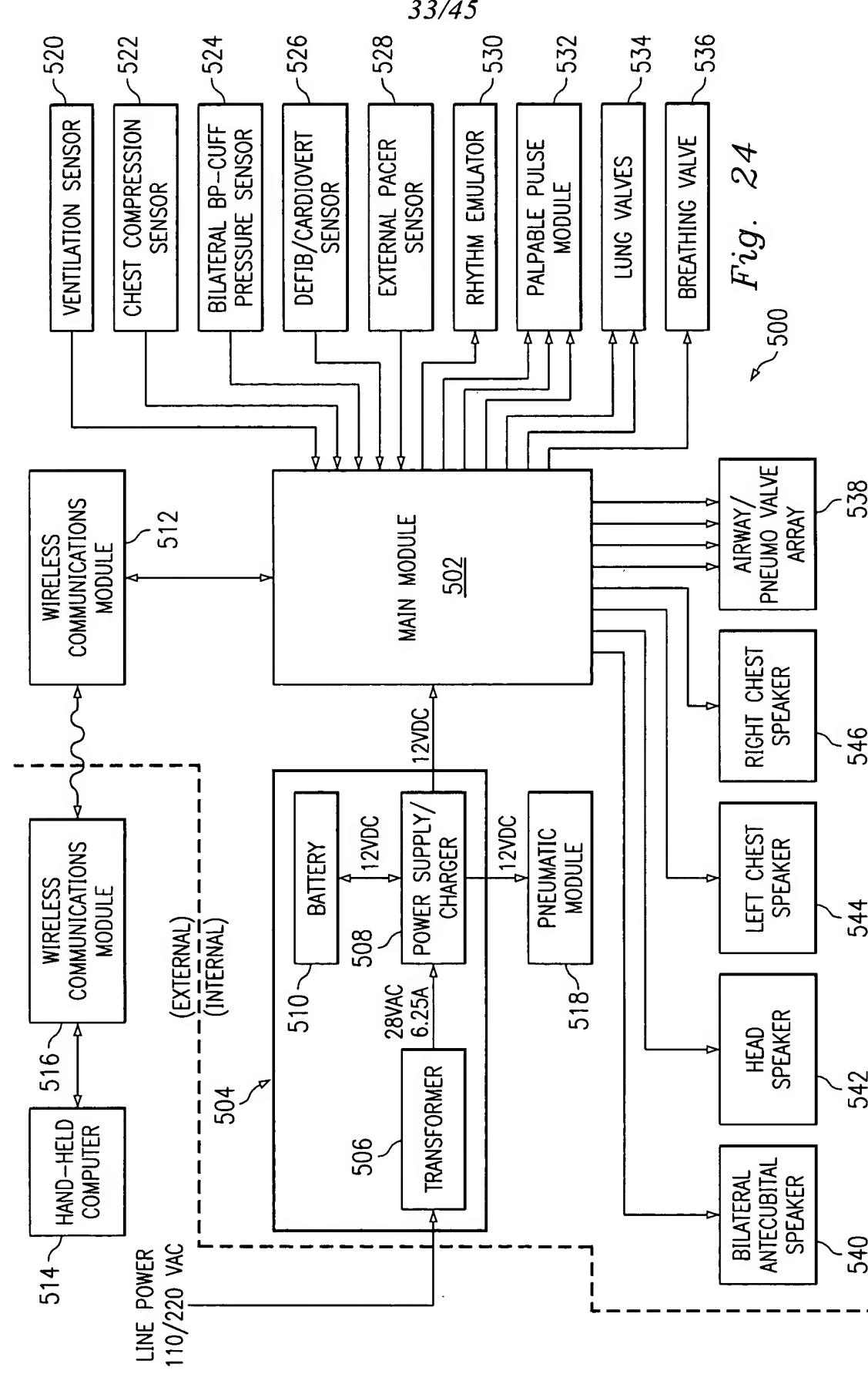
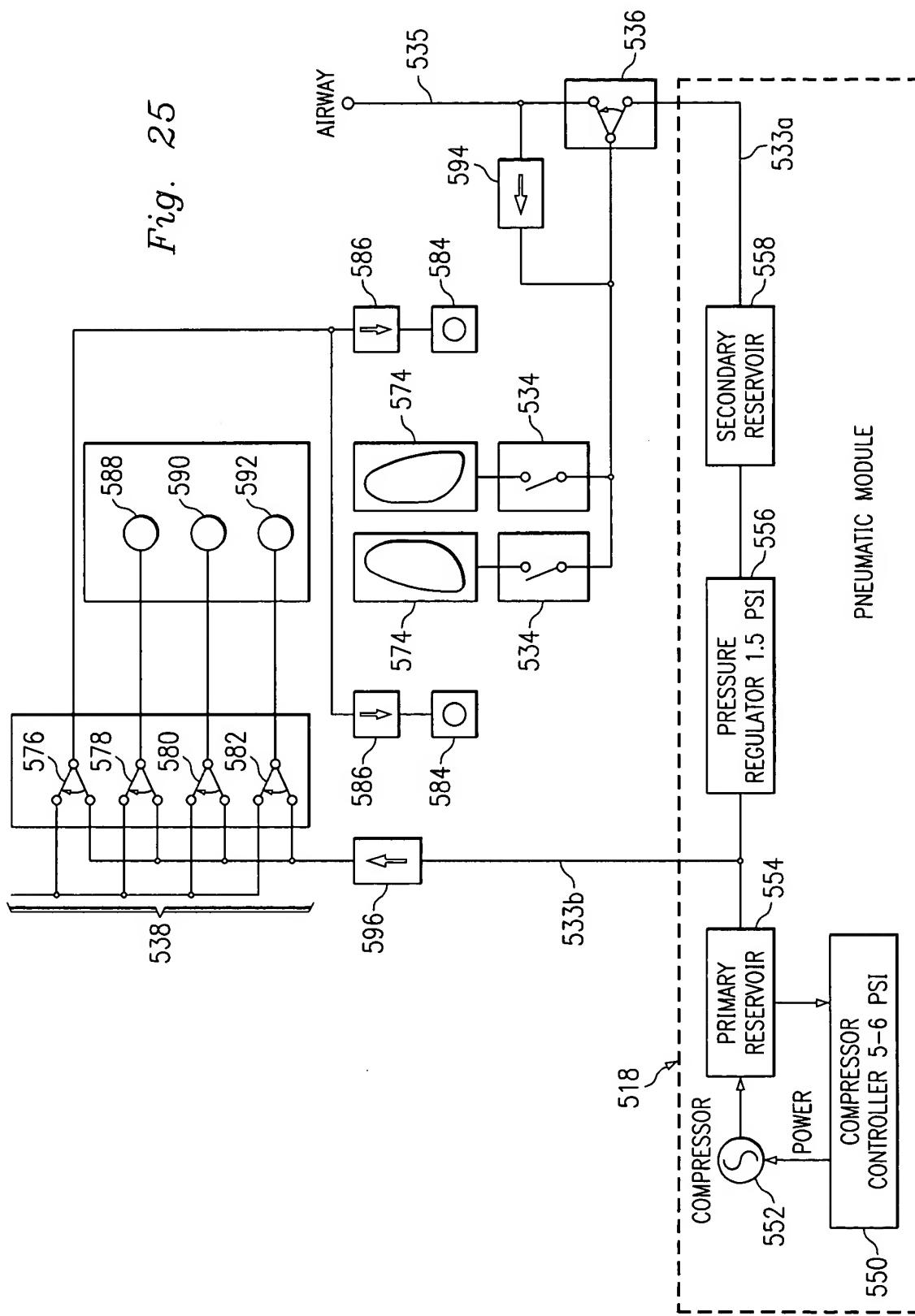


Fig. 25



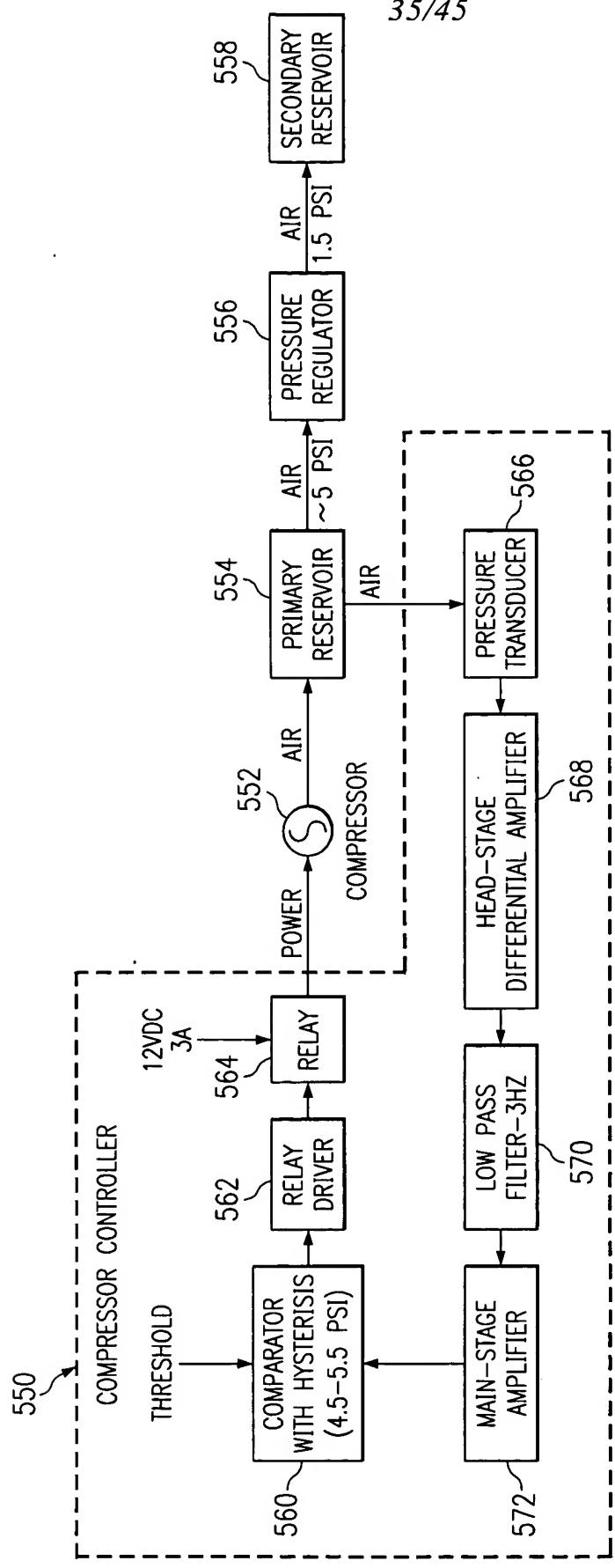


Fig. 26

36/45

Fig. 27

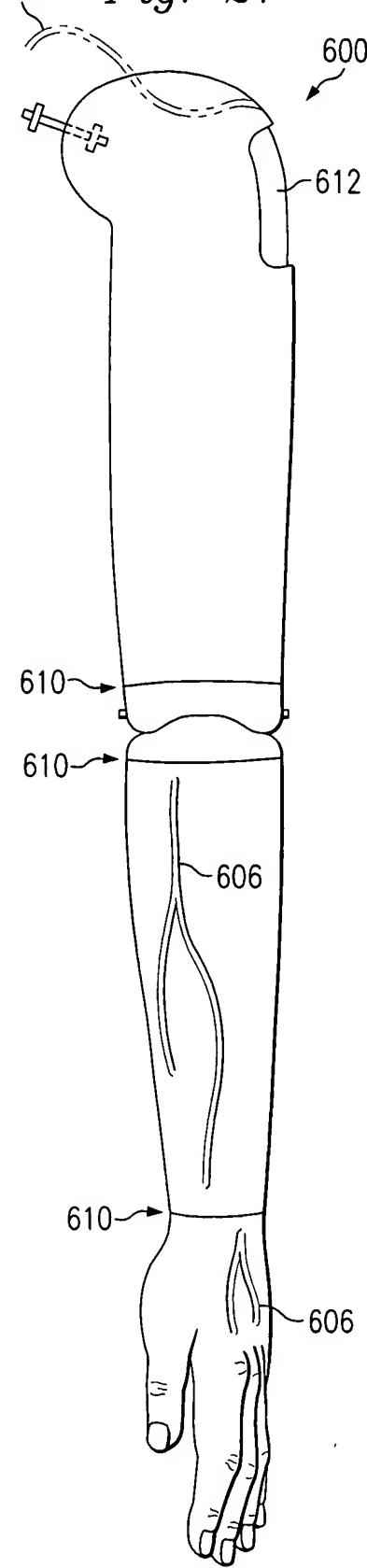


Fig. 28

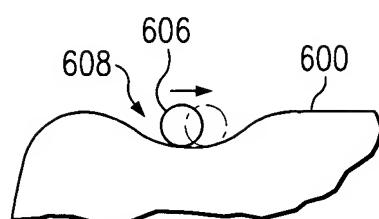


Fig. 29

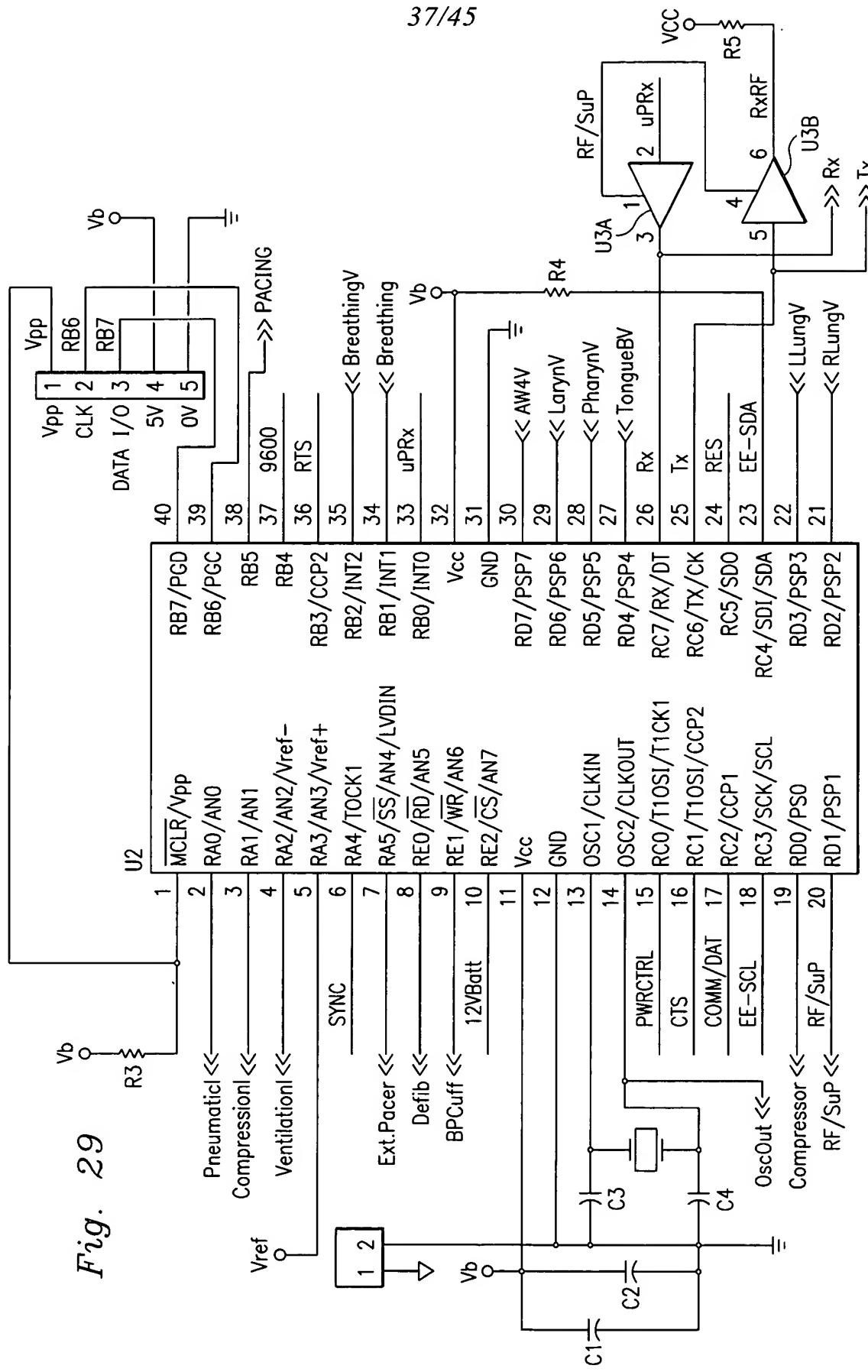
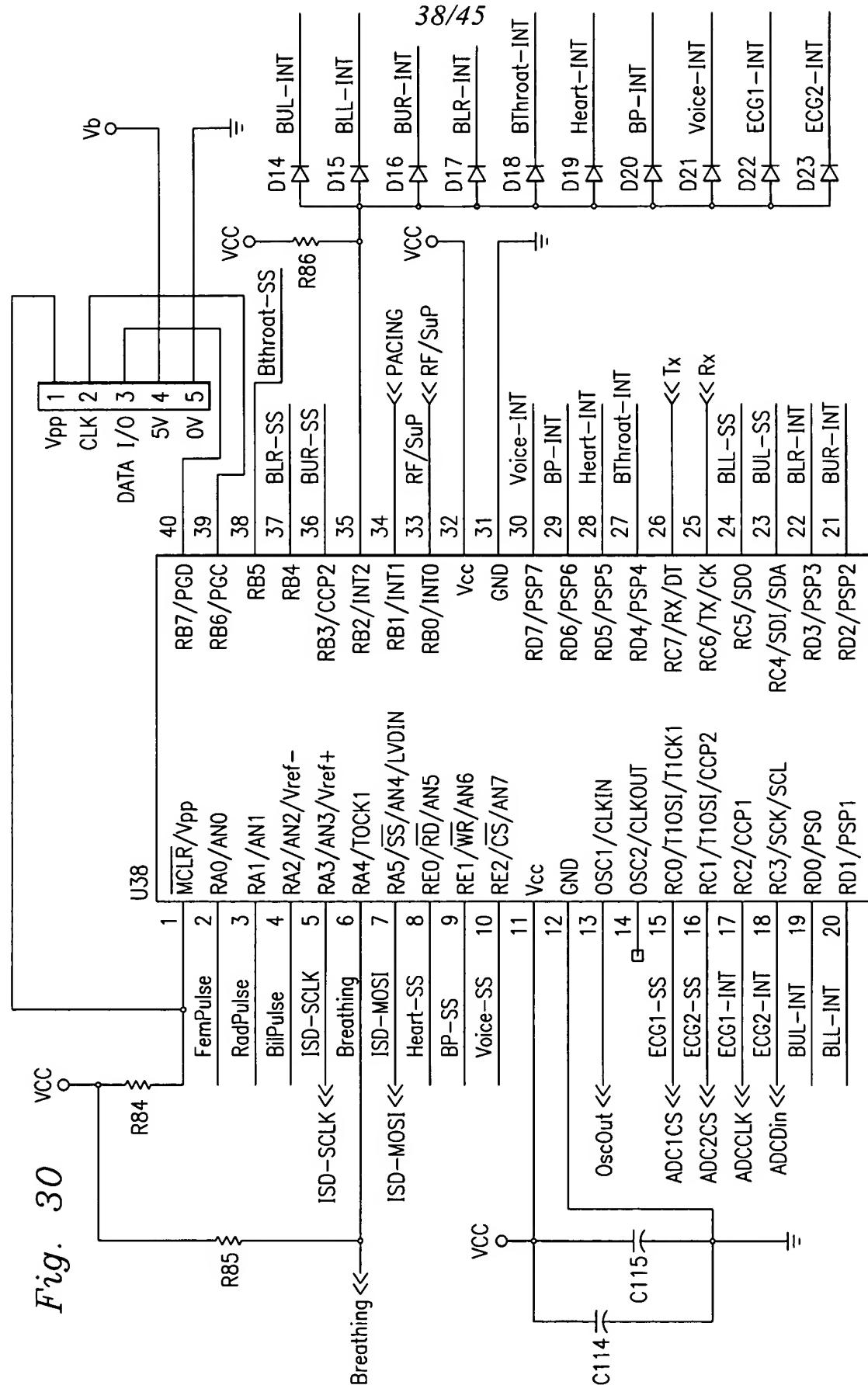


Fig. 30



39/45

Fig. 31

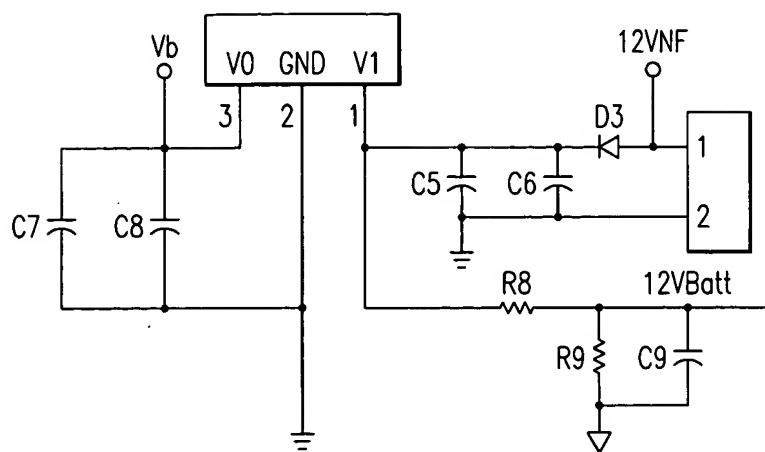


Fig. 32

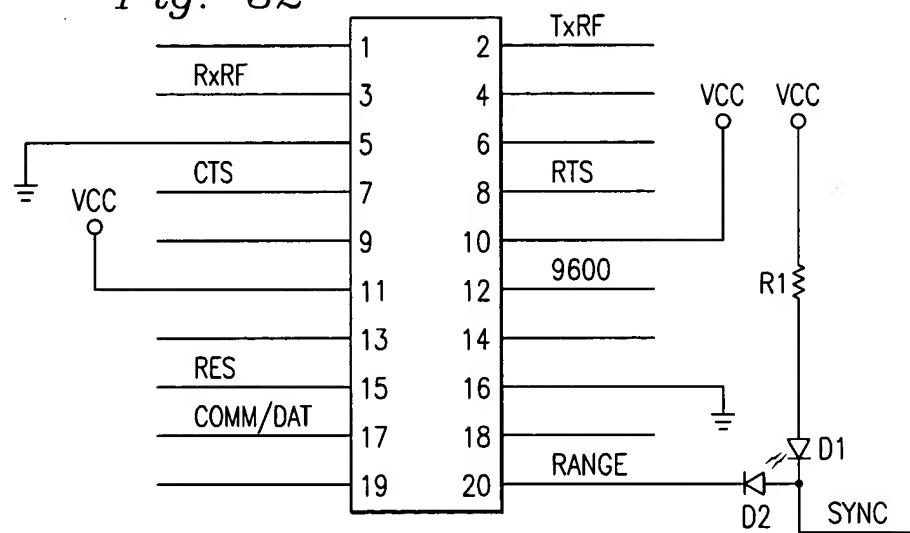


Fig. 33

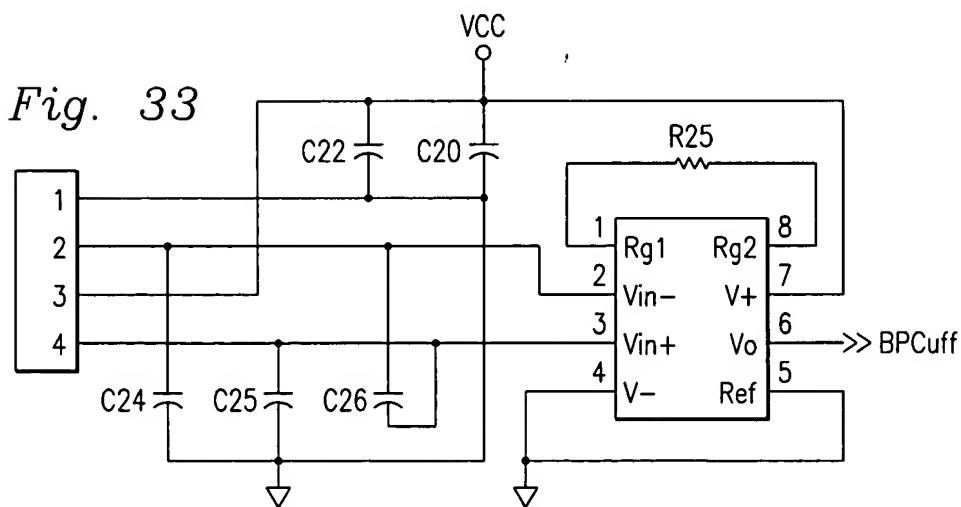
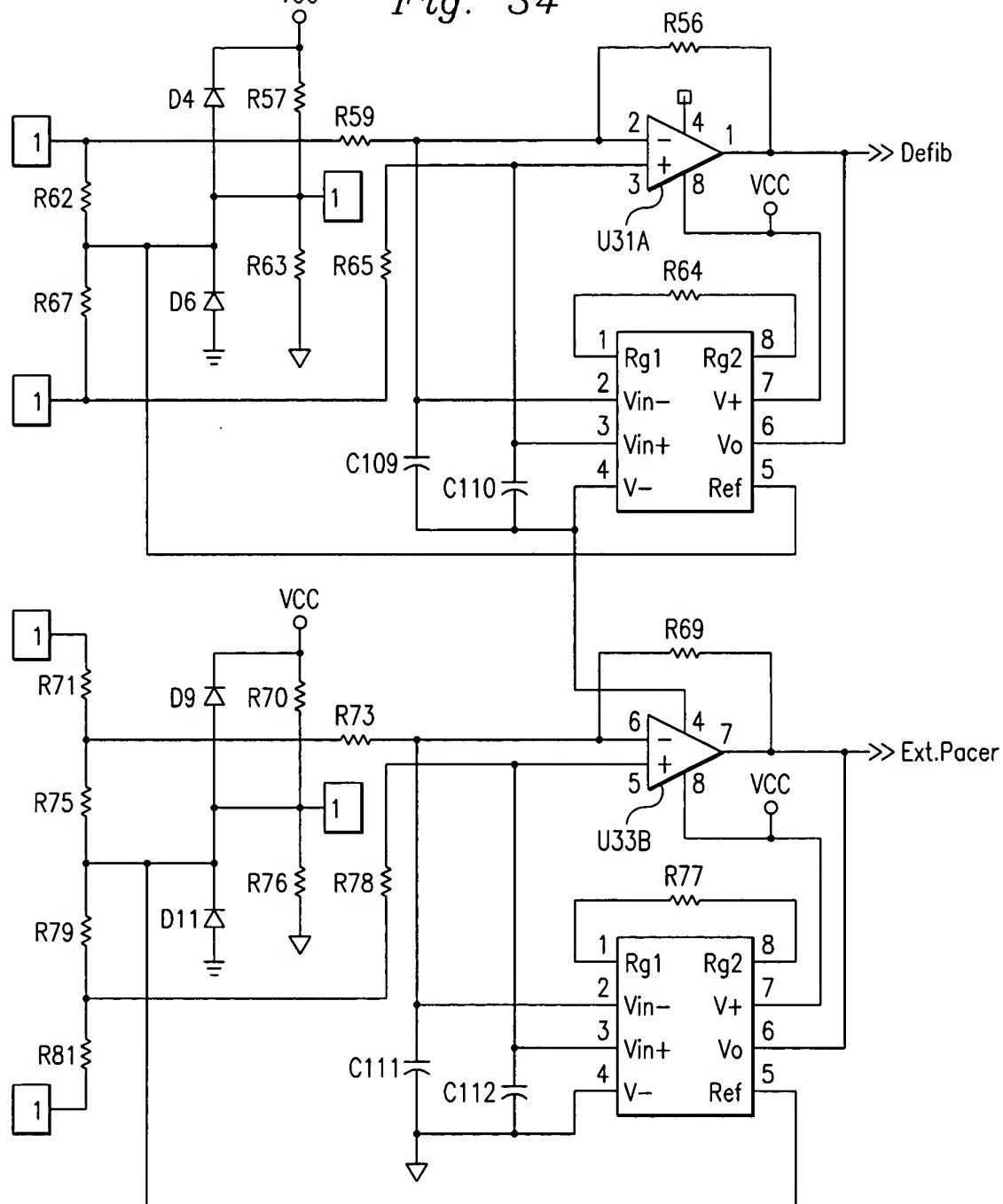
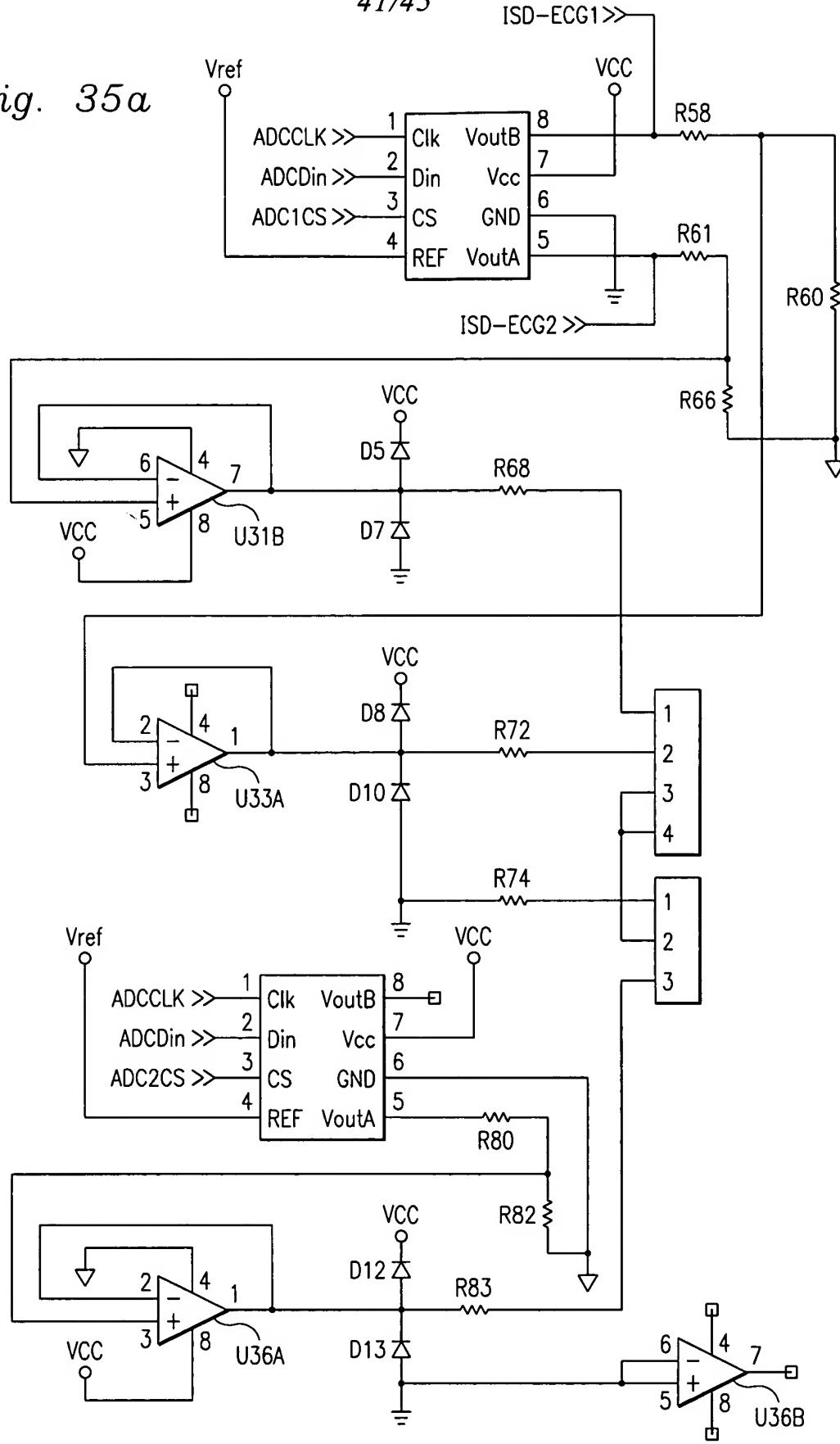


Fig. 34



41/45

Fig. 35a



42/45

Fig. 35b

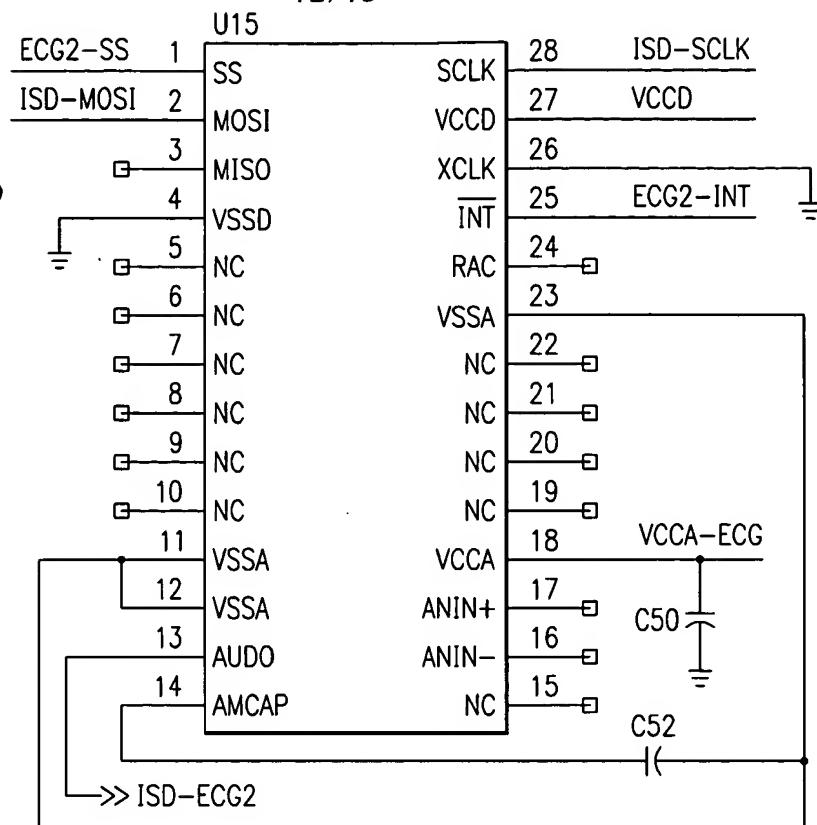
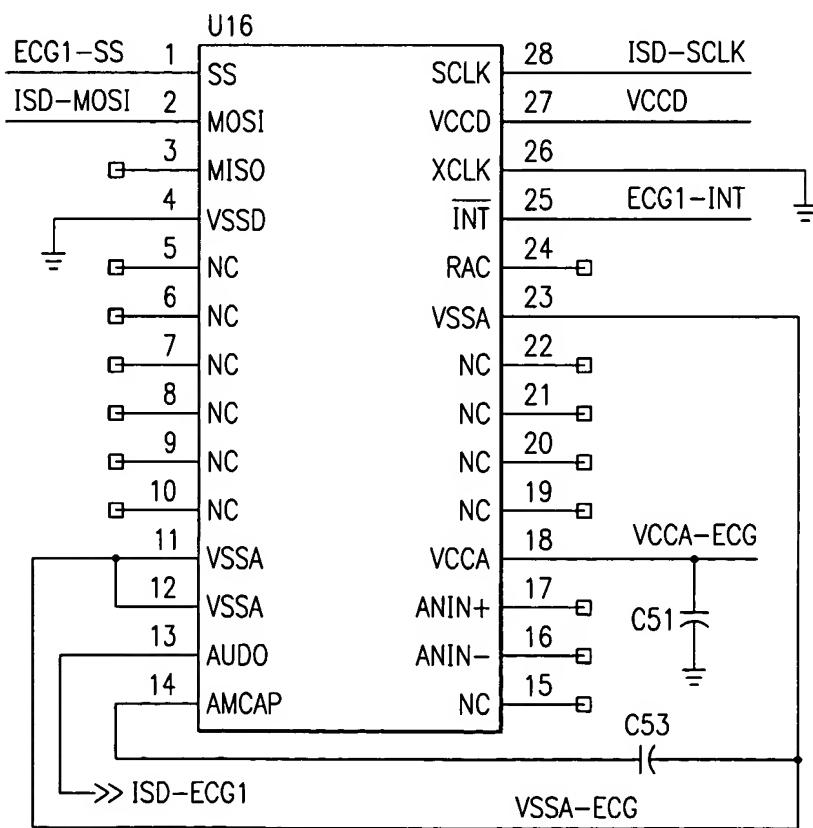
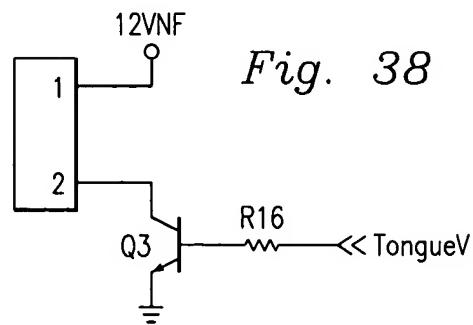
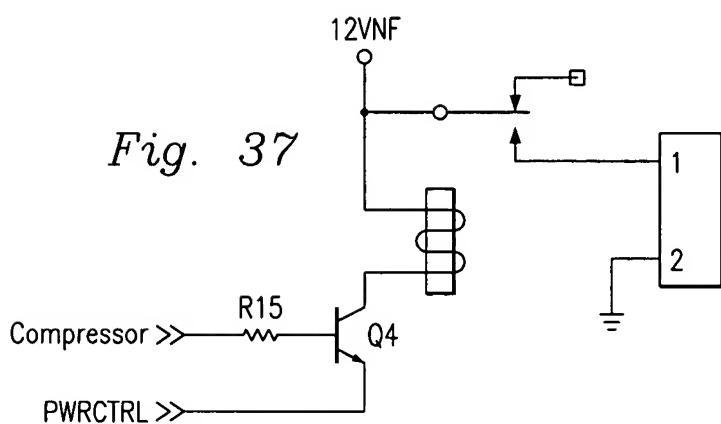
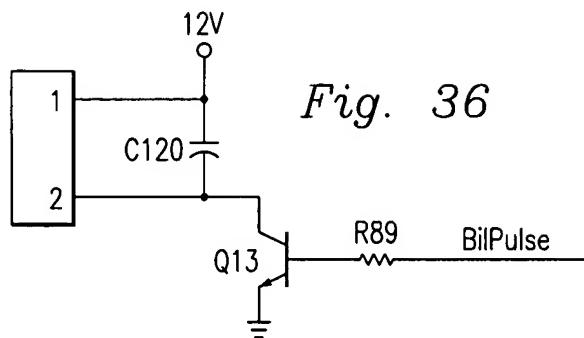


Fig. 35c





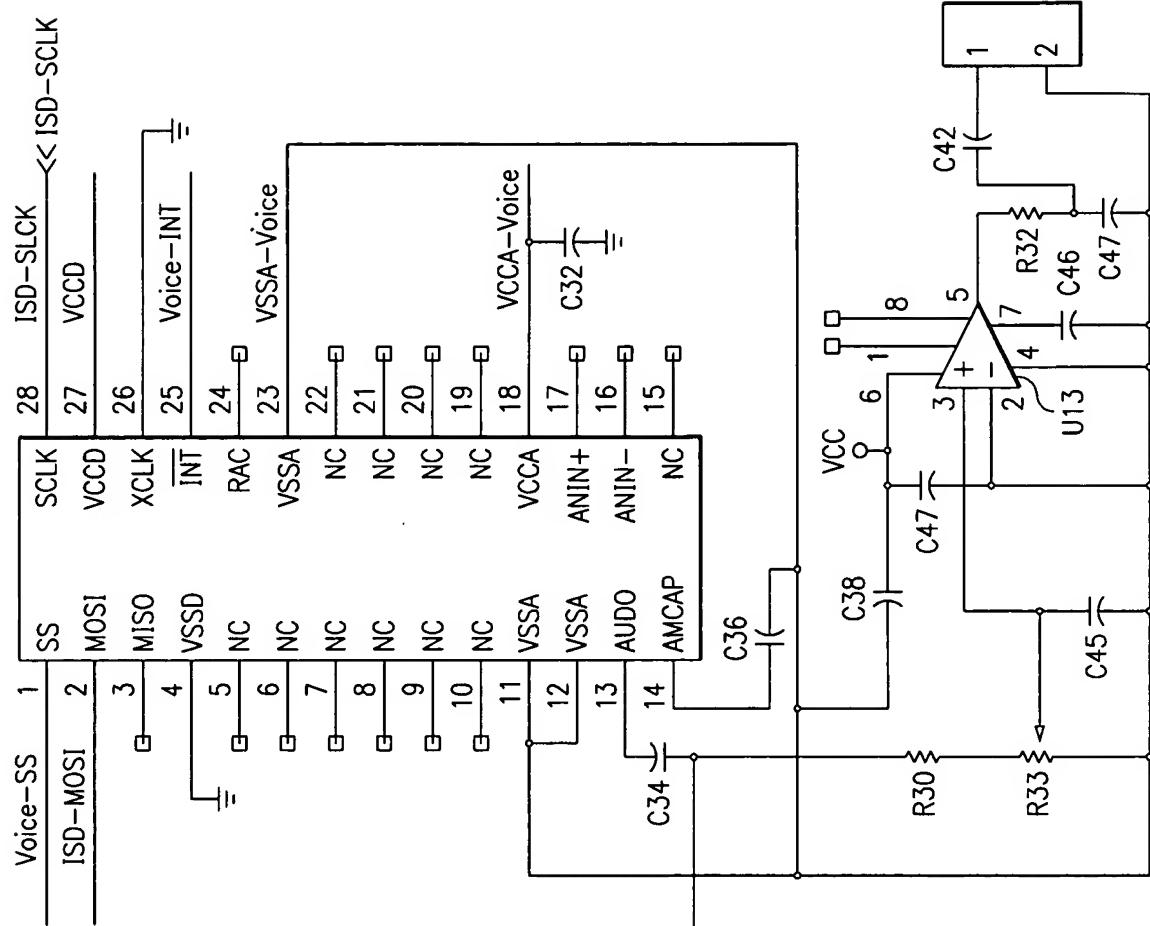
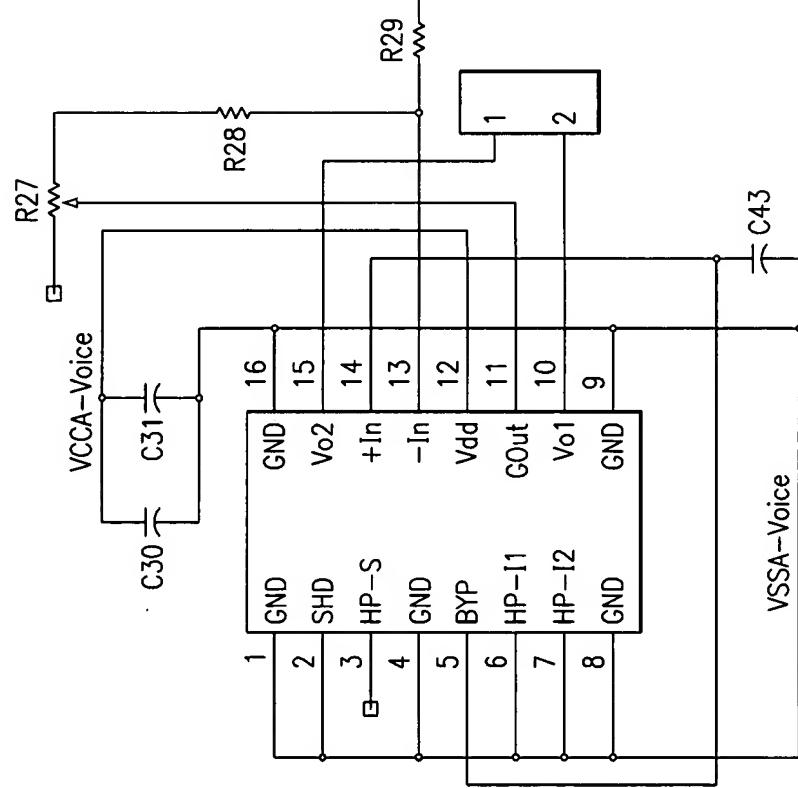


Fig. 39



*Fig. 40*

